



# Wisconsin Department of Corrections

Governor Scott Walker | Secretary Jon E. Litscher

## Office of Detention Facilities

March 30, 2018

Sheriff David Mahoney  
Dane County Sheriff's Office  
115 W. Doty Street  
Madison, WI 53703

**Re: 2017 Jail Inspection**

Dear Sheriff Mahoney:

Pursuant to Wisconsin Statute §301.37(3), an inspection of the Dane County Jail (Public Safety Building & City-County Building) was conducted on December 13<sup>th</sup> – 15<sup>th</sup>, 2017. The inspection compared the facility to the Department of Corrections Administrative Code Chapter DOC 350, applicable State Statutes, and best correctional practices. The process included a review of records, dialogue with staff and inmates, and a walkthrough of the buildings to assess the safety, sanitation, adequacy, and fitness of the facilities. This correspondence will summarize the findings of the inspection.

### OVERVIEW OF FACILITY

**PUBLIC SAFETY BUILDING (PSB)** – The Public Safety Building was constructed in 1994. The detention areas consist of three (3) floors:

- [REDACTED]
- [REDACTED]
- [REDACTED]

The PSB has a maximum rated capacity of 408 adult inmates and is not approved to hold juveniles. The PSB population at the start of the inspection was 402.

**CITY-COUNTY BUILDING (CCB)** – The City-County Building was constructed in 1956 with two floors on the East side of the building. In 1985, the jail was expanded to occupy the West side of the building for the same two floors (6<sup>th</sup> & 7<sup>th</sup>). The detention areas consist of the following:

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

The CCB is a linear-designed jail and has a maximum rated capacity of 355 adult inmates (this facility is not approved to hold juveniles). The CCB population at the start of the inspection was 277.

*\*It should be noted at the start of the inspection, 61 inmates were also at the Ferris Center and 84 individuals were on Jail Diversion.*

## **INMATE RESOURCES**

The Dane County Jail provides extensive programming opportunities for inmates. The following summarizes what is typically available (as this can change throughout the calendar year):

- **EDUCATION** – Educational instruction is provided by the Madison Metropolitan School District as well as the Madison Area Technical College on a daily basis.

The jail also has a **Reading Education Addult Development (READ) Program. The software program is phonics-based and is designed for adults experiencing reading problems or learning to read English.**

- **SUPPORT GROUPS** – AA, NA, Al-Anon, and the VA 101 Program.
- **LIFE SKILLS PROGRAMMING** – Women’s Empowerment Group, Anger & Stress Management, Budgeting, Emotional Awareness Group, the Inmate Volunteer Program, Beginnings, Greater Isthmus Group, the Madison Area Urban Ministry Employment Initiative, the Madison Area Urban Ministry Mentoring Connections, Voices Beyond Bars, WI Evangelical, the Urban League of Greater Madison Area Fatherhood Program, Facing Freedom, and Skilled Trades Apprenticeship Readiness Training (which includes apprenticeships for Boilermakers, Bricklayers, Carpenters, Cement Masons, Drywall Finishers, Electrical Workers, Elevator Constructors, Glaziers, Insulators, Iron Workers, Laborers, Operating Engineers, Painters, Plasterers, Plumbers, Roofers, Sheet Metal Workers, Sprinkler Fitters, Steamfitters, and Tile Setters).
- **RELIGIOUS SERVICES** – Religious services and Bible studies of various denominations are held throughout the week. The jail chaplains are available Monday through Friday and are on-call for counseling emergencies. Specific denominational services, as well as individual consultations can also be facilitated.  
  
Huber inmates from the Ferris Center may volunteer to participate in the Christian Intervention Program at the Calvary Gospel Church. Inmates attend classes which deal with life skills: parenting and child care issues, job skills, decision-making, anger management, alcohol and AODA issues.
- **VISITATION** – Inmates are generally afforded two 45-minute visits per week. Visits are conducted both electronically and via non-contact booths (the PSB can also accommodate contact visitation).
- **COMMISSARY** – Canteen is provided by CBM Managed Services and inmates are generally allowed to order weekly.
- **RECREATION** – Both buildings have indoor/outdoor recreational opportunities (although this can be influenced by the weather and amount of interest). Inmates in the CCB reported monthly access to recreation while inmates in the PSB reported weekly recreation.

- **READING MATERIALS** – Inmates are afforded regular access to reading materials. The jail also provides Kid Connection, a sub-program within the jail library. The goal of the program is to promote literacy among children and incarcerated adults, as well as to facilitate a positive connection between child and parent. A parent is given the opportunity to record a children's book on a cassette tape. The tape and book are mailed to the child, who then reads along in the book while listening to their parent's tape-recorded reading.

## **CHANGES**

*The following is a list of changes since last year's inspection:*

### **CCB:**

- Installed a new high efficiency security grade dishwasher in the 6-East kitchen.
- For cellblock 623:
- The bunks were welded to the wall and painted.
  - An epoxy coating was applied to the floor.
  - Removed any excess pieces from the washbasins/toilets that were deemed a suicide hazard.
- Removed all nonfunctioning electrical and telephone outlets from the hallways on the East side of the jail.
- [REDACTED]
- [REDACTED]
- Installed a new register cover on the heater in the 6-East kitchen.
- Installed new light bulb and telephone switch covers in the laundry storage room (with security screws).
- Installed new inmate evacuation chairs on 6-West and 7-East.
- Installed new shelving in the mattress storage room on 6-West.
- Installed a new security window to the MH hallway on 7-East.
- Mops in the 6-West storage closets are now hung on the wall (no longer left in the buckets).
- Painted the 7-East fire door.
- Painted half of the floor on 6-East. Per Mental Health, the hall was painted "rain drop" blue which provides a calming effect.
- Secured the door to [REDACTED]
- Removed all soap dispenser backings on the West side of the jail.
- Transferred all of the old inmate medical files (paper copies) from the CCB to a secured central storage location on the 4<sup>th</sup> floor of the PSB.
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- Implemented a thorough quarterly cleaning system.
- Initiated routine drain cleaning to assist with insect control.
- Implemented new wellness check procedures for staff (having another deputy present when entering a cellblock).

### **PSB:**

- Completed renovations of units 3C/E and 3G/I to include:
- Replaced shower fixtures and installed new stainless steel inserts.
  - Cleaned and resealed the bathroom floors.

- Installed new bathroom light fixtures.
- Cleaned the ductwork.
- Painted all of the walls, ceilings, and doors.
- Replaced the dayroom carpeting.
- Cleaned the HVAC coils.
- Provided low voltage wiring and transformers for the plumbing solenoid valves.
- Reconfigured some of the bunks and dayroom tables.
- Cleaned and resealed the shower floors for 3A, 3K, 4A, and 4K.
- Removed all old soap dispensers and replaced with new ones.
- Purchased new laundry machines and refrigerators.
- Established a calming sensory room in 3C (to assist inmates with managing stress/anxiety).

### **MEDICAL:**

- Expanded the Vivitrol® program.
- Established a formal process for reviewing lab results.
- Passed an audit from the National Commission on Correctional Health Care.
- Expanded relationships with community providers/stakeholders (e.g. coordination of treatment plans).

### **GOALS**

*The following is a list of goals for the upcoming year:*

- [REDACTED]
- Utilization of tablets by inmates.
- Develop a comprehensive restrictive housing plan (consistent with best practices and to reduce the number inmates in this status).
- [REDACTED]
- Obtain more CleanCore™ Caddies for facility cleaning.
- Explore enhanced technological options for documenting wellness checks, item issuances, and programming location changes.
- Continue Crisis Intervention Team (CIT) training for staff.

### **SUMMARY OF INSPECTION**

I met with Dane County administrative, security, and medical personnel to conduct the annual inspection. The site visit included a review of records, dialogue with staff and inmates, and a walkthrough of the buildings to assess the safety, sanitation, adequacy, and fitness of the facilities. The attached checklist details my findings as they relate to the Department of Corrections Administrative Code Chapter DOC 350, applicable State Statutes, and best correctional practices.

**PUBLIC SAFETY BUILDING (PSB)** – In summary, the overall appearance of the PSB was in satisfactory condition. A spot check of facility conditions and mechanical devices noted the following issues:

- ☒ Graffiti was observed on the ceilings of 4C and 4G above the bunks at the back of the housing units.
- ☒ The ceilings outside of the 3A, 3K, 4A, 4C, and 4I showers needed cleaning.
- ☒ The majority of bathroom air vent covers outside of the showers needed cleaning.

- ☒ Flies were observed in the 3G showers (documentation of monthly pest control was observed).
- ☒ [REDACTED]
- ☒ The bottom of the 3C refrigerator needed cleaning.
- ☒ It is recommended security caulk is applied along the accessible conduit for video visitation.

It should be noted the aforementioned issues were forwarded on to supervisory/facilities management staff.

Inmate feedback regarding conditions of confinement and staff supervision was mixed. The only common-themed complaint was specific to the cleanliness of certain housing unit bathrooms (most notably the showers and air vents).

**CITY-COUNTY BUILDING (CCB)** – In summary, the overall appearance of the CCB was in satisfactory condition. A spot check of facility conditions and mechanical devices noted the following issues:

- ☒ The observation window for the cell-C door in 627 was broken (it has since been fixed).
- ☒ The hot water valve for cell-G in 609 was broken (the cell is currently out of service).
- ☒ The ceiling outside of the shower in 720 needed cleaning (it has since been cleaned).
- ☒ Graffiti was observed in the 627 urinal stall (it has since been removed).
- ☒ Multiple showers in 6-West are showing signs of wear and deterioration (flies were observed in the 611 shower).
- ☒ The corners of the exam tables in the 6-West health services area (room #6014) are worn away.
- ☒ Inmates in 7-East complained about inconsistent hot water temperatures in their washbasins (supplemental plumbing is in the process of getting installed).

Inmate feedback regarding conditions of confinement was mixed (common-themed complaints were specific to water quality issues and a lack of recreation/dayroom activities). Inmate feedback regarding staff supervision was generally positive. My observations during the inspection revealed cordial and professional interactions between staff and inmates.

It should be noted the CCB Mitigation Project started during this inspection period, which addresses such health and safety issues as locking mechanisms, HVAC maintenance, and fire safety [REDACTED]

- ☒ [REDACTED]

- ☒ **Plumbing** – Due to the age of the plumbing system on the East side of the CCB, maintenance staff are unable to readily find replacement parts for the cell toilets/washbasins. As a result, staff are often reduced to taking plumbing fixtures from one cell to fix another (rendering the pirated cell inoperable). Additionally, certain leaks and pest control issues can be attributed to deteriorating pipes. As previously noted, supplemental plumbing is currently being added to the cellblocks in 7-East to address inconsistent hot water temperatures.

- ☑ **Afternoon Lockdown** – To reduce inmate movement and assist staff with completing certain tasks, inmates in the CCB are locked down between the hours of 2:00 p.m. – 4:00 p.m. It was reported this practice, in part, is a result of the disadvantageous configuration of the jail. While it is not necessarily unique to lock inmates down during shift change, this duration of time is.
- ☑ **Mental Health Assessments** – Due to a lack of available meeting space and the logistics of moving a higher security population, mental health staff often conduct their assessments through the bars or doors at the front of each housing unit. The concern with this arrangement is the possibility of other inmates and staff overhearing the conversation. Inmates once again disclosed during the inspection that they were reluctant to share information during the assessment process (given the lack of privacy/confidentiality). It goes without saying, an inmate’s apprehension to divulge pertinent information can affect the integrity of a mental health assessment.
- ☑ **Recreation** – Due to limited recreation space and the logistics of moving a higher security population, inmates in the CCB reported only having monthly access to the recreation area (as opposed to weekly access in the PSB).
- ☑ **Privacy** – Many of the housing units are configured so that cells are positioned directly across from each other (affording little privacy when changing clothes or using the toilet). Consequently, sheets have been observed tied to the cell-front bars for added privacy during previous inspections. This practice limits staff sightlines and compromises safety and security.

*In addition to the above concerns, the following are other physical plant limitations of the jail:*

- ☑ **Food Service** – It is customary for a facility of this size to have an onsite full-production kitchen. The Dane County Jail, however, only has small service kitchens in each building (which are not large enough to prepare hot meals). Accordingly, lunch and dinner must be prepared offsite.
- ☑ **Laundry** – It is customary for a facility of this size to have onsite laundry services. Due to a lack of space, the jail also relies on offsite laundering for inmate bedding.
- ☑ **Storage Space** – This is an ongoing concern, as property is stored in every available area within the jail.
- ☑ **Medical** – While each building has a clinic area, both are small for a facility of this size. Actual work space for the medical staff is particularly limited (when needing the space for examinations, supplies, medication storage, etc.).
- ☑ [REDACTED]
- ☑ **Youthful Inmate Housing** – As noted in previous inspections, the DCSO has been diligently working towards becoming compliant with the PREA standards. Standard §115.14 dictates that “A youthful inmate shall not be placed in a housing unit in which the youthful inmate will have sight, sound, or physical contact with any adult inmate through use of a shared dayroom or other common space, shower area, or sleeping quarters.” While efforts are made to house inmates who are 18 years of age and older from those who are not, the current configuration of the jail does not allow for proper sound separation.

- ☑ **Special Needs Cells** – Inmates in need of special housing for medical or mental health issues (e.g. uncooperative booking, intoxicated, withdrawal, illness, suicide watch, etc.) are housed in various segregation cells between the two buildings. Some of the cells were not designed for long-term housing (e.g. no adjacent dayroom space, lack of natural light, etc.) while others have poor sightlines for maintaining enhanced observation. The limited amount, design, and configuration of these cells impacts staff’s ability to interact with and supervise this vulnerable population.

Theses shortfalls, in part, illustrate how antiquated the facility is and how operating a jail in three separate buildings (one of which is over 60 years old) poses ongoing logistical and operational challenges. All said, it is important to acknowledge that Dane County recently approved a comprehensive jail renovation project which would consolidate operations to one building (by adding four floors to the PSB and discontinuing use of the CCB and Ferris Center).

## **VIOLATIONS**

*The following violations were noted during this inspection process:*

- ☑ **Administrative Code DOC 350.11(8)** requires food items to be stored at least six inches off the floor. Milk cartons were observed on the floor of the CCB cooler during the inspection.
- ☑ [REDACTED]
- ☑ **Administrative Codes DOC 350.16(7) and DOC 350.16(8)** require that medications administered to or refused by an inmate shall be documented. A spot check of medication administration records revealed noncompliance, as a couple of unexplained gaps were observed.
- ☑ **Administrative Codes DOC 350.18(1)(a) and 350.18(1)(b)** require that all inmates are personally observed by security staff at staggered intervals not to exceed 60 minutes in length (15 minutes for those inmates on a suicide watch). A spot check of records revealed noncompliance, as multiple overages were observed for both types of wellness checks. Of additional concern, the jail log reflects some of the wellness checks for suicide watches were completed via security camera. As was discussed during the inspection closeout, addressing this area of operations needs to be an administrative priority.
- ☑ **Jail Policies** – There are a few jail policies which necessitate updating to address the requirements of Administrative Code DOC 350. When the manual is updated, please forward it to this office for formal review/approval.

## MISCELLANEOUS

*The following miscellaneous issues were also noted during this inspection process:*

- ☑ **Inmate Classification** – A spot check of records verified general compliance; however, there are occasional issues with the proper separation of inmates by classification in both buildings.
- ☑ **Facility Searches/Shakedowns** – A spot check of records verified general compliance; however, not all housing units are getting searched on a [REDACTED] basis.
- ☑ **Use of Restraints** – A spot check of records verified general compliance; however, staff reports for one incident did not reflect the total time an inmate spent in a restraint chair.
- ☑ **Inmate Disciplines** – A spot check of records verified general compliance; however, documentation of applicable minor disciplinary procedures was limited in staff incident reports. Of additional concern during the inspection, an inmate had been in "lockdown" status for a week and had yet to receive any disciplinary paperwork or hearing.
- ☑ **Inmate Counts** – A spot check of records verified general compliance; however, there were inconsistencies with how formal counts were documented. Of additional concern, a jail log entry noted one inmate was formally counted via security camera.
- ☑ **Suicide Watch Documentation** – A spot check of records verified general compliance; however, there were inconsistencies with the completion of this section within the jail management system (it should be noted administration sent a follow-up email to all staff).

## APPROVAL

The Dane County Jail (PSB/CCB) is approved to hold adult inmates with a rated capacity of 763. This approval is contingent upon correction of the noted violations and the continued compliance with Chapter DOC 350 and applicable State Statutes. I would like to thank your staff for their assistance and cooperation during the inspection. All of the documents I requested were well prepared and organized. Please do not hesitate to contact my office should you have any questions regarding this report.

Professionally,



Nathan White, Inspector  
**DEPARTMENT OF CORRECTIONS**

Cc: Jeff Hook, Chief Deputy  
Timothy Ritter, Jail Captain  
Brian Mikula, Jail Lieutenant



Charles Immel, Jail Lieutenant  
Chris Nygaard, Jail Lieutenant  
Kurt Pierce, Jail Lieutenant  
Michelle DeForest, Administrative Manager  
Kristi Dietz, ODF  
File

## CHAPTER DOC 350 INSPECTION DOCUMENT

COUNTY: Dane

DATE: 12/13/17 - 12/15/17

### INMATE HOUSING AND CLASSIFICATION

**DOC 350.05 (3) (d)** In jails that are constructed or substantially remodeled on or after September 1, 2014, double cells shall have a floor area of at least 25 square feet of unencumbered space per occupant.

#### COMPLIANCE

#### VERIFICATION

|  |  |   |
|--|--|---|
| <input type="checkbox"/> Meets standard          | <input type="checkbox"/> Policy and procedure manual review    | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement       | <input type="checkbox"/> Sample of facility records reviewed   | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/> Non-compliant           | <input type="checkbox"/> Sight confirmation by inspector       |   |
| <input checked="" type="checkbox"/> Not reviewed | <input type="checkbox"/> Verbal confirmation by facility staff |   |

Comments:

**DOC 350.06 (3) (d), DOC 350.07 (4)** In jails that are constructed or substantially remodeled prior to September 1, 2014, to be used for double occupancy, a cell shall have a floor area of at least 70 square feet. NOTE: ODF recognizes current code does not reflect the "grandfather" provision that prior to March 1, 1990, a cell shall have a floor area of at least 54 square feet.

#### COMPLIANCE

#### VERIFICATION

|  |  |   |
|--|--|---|
| <input type="checkbox"/> Meets standard          | <input type="checkbox"/> Policy and procedure manual review    | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement       | <input type="checkbox"/> Sample of facility records reviewed   | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/> Non-compliant           | <input type="checkbox"/> Sight confirmation by inspector       |   |
| <input checked="" type="checkbox"/> Not reviewed | <input type="checkbox"/> Verbal confirmation by facility staff |   |

Comments: N/A---The Dane County Jail does not having double occupancy cells.

**DOC 350.20 Double celling.** If approved by the department, the jail shall have policies and procedures relating to double celling.

**DOC 350.20 (1)** The county board and sheriff shall determine jointly the adequate staffing needs, including support staff and services that are required to ensure the health, safety and security of the jail staff and inmates when using cells for double occupancy. The joint determination shall be in writing and signed by the representatives of the county board and the sheriff and shall be filed with the department. The written joint determination shall remain in effect until rescinded or amended by mutual written agreement of the county board and sheriff. Unless there is adequate staff as agreed upon by the county board and sheriff, double celling may not occur.

**The written agreement between the County Board and Sheriff is on file with the department and contains the following elements:**

- The County Board and Sheriff agree to the stated staffing levels
- The staffing levels include security staff, health care staff, support and service staff and administrative staff
- The staffing pattern is detailed in the written agreement
- The agreement is signed by representatives of the County Board and the Sheriff

#### COMPLIANCE

#### VERIFICATION

|  |  |   |
|--|--|---|
| <input type="checkbox"/> Meets standard          | <input type="checkbox"/> Policy and procedure manual review    | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement       | <input type="checkbox"/> Sample of facility records reviewed   | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/> Non-compliant           | <input type="checkbox"/> Sight confirmation by inspector       |   |
| <input checked="" type="checkbox"/> Not reviewed | <input type="checkbox"/> Verbal confirmation by facility staff |   |

Comments: N/A

**DOC 350.20 (2) Inmates housed in the same cell shall have the same custody classification and be properly segregated as required under s. 302.36, Stats.**

| COMPLIANCE                                       | VERIFICATION  |
|--|---|
| <input type="checkbox"/> Meets standard          | <input type="checkbox"/> Policy and procedure manual review <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement       | <input type="checkbox"/> Sample of facility records reviewed <input type="checkbox"/> Other (specify):              |
| <input type="checkbox"/> Non-compliant           | <input type="checkbox"/> Sight confirmation by inspector  |
| <input checked="" type="checkbox"/> Not reviewed | <input type="checkbox"/> Verbal confirmation by facility staff  |

Comments: N/A

**DOC 350.20 (3) For male and female housing areas, at least one cell or 15% of the jail's total number of cells, whichever is greater, shall be maintained for single occupancy.**

| COMPLIANCE                                       | VERIFICATION  |
|--|---|
| <input type="checkbox"/> Meets standard          | <input type="checkbox"/> Policy and procedure manual review <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement       | <input type="checkbox"/> Sample of facility records reviewed <input type="checkbox"/> Other (specify):              |
| <input type="checkbox"/> Non-compliant           | <input type="checkbox"/> Sight confirmation by inspector  |
| <input checked="" type="checkbox"/> Not reviewed | <input type="checkbox"/> Verbal confirmation by facility staff  |

Comments: N/A

**DOC 350.20 (4) Receiving cells may not be used for double occupancy.**

| COMPLIANCE   | VERIFICATION  |
|--|---|
| <input checked="" type="checkbox"/> Meets standard | <input type="checkbox"/> Policy and procedure manual review <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input type="checkbox"/> Sample of facility records reviewed <input type="checkbox"/> Other (specify):              |
| <input type="checkbox"/> Non-compliant             | <input checked="" type="checkbox"/> Sight confirmation by inspector   |
| <input type="checkbox"/> Not reviewed              | <input checked="" type="checkbox"/> Verbal confirmation by facility staff   |

Comments:

**DOC 350.21 Inmate classification. All jails shall meet the requirements set forth in s. 302.36 Stats. The sheriff shall establish and maintain an objective prisoner classification system to determine prisoner custody status and housing assignment, and develop eligibility criteria for prisoner participation in available work assignments, programs and community service projects. The jail shall have policies and procedures relating to classification.**

**DOC 350.21 (1) Description of the objective prisoner classification system, including the identification and training of staff authorized to classify prisoners, initial classification and reclassification procedures and prisoner appeal process.**

**DOC 350.21 (2) Eligibility criteria for prisoner participation in available work assignments, programs and community service projects.**

**DOC 350.21 (3) Review of prisoner classification decisions.**

- The jail has implemented an objective classification system based on point additive formula or decision tree forced choice or similar formalized mechanism for housing determination.
- A written policy is provided to all correctional staff detailing classification process.
- Policy clearly identifies personnel authorized to classify inmate housing assignments.
- Personnel assigned to complete inmate classification assignment receive formal training.
- A process is in place for supervising personnel to complete a secondary review of reclassification and appeals.
- Sufficient housing exists to meet classification guidelines to male and female inmates.
- Inmates housed in the same cell shall have the same security classification and be properly segregated as required in s. 302.36 Stats.

| COMPLIANCE  | VERIFICATION   |
|---|--|
| <input checked="" type="checkbox"/> Meets standard    | <input checked="" type="checkbox"/> Policy and procedure manual review <input type="checkbox"/> Previous compliance documented |
| <input checked="" type="checkbox"/> Needs improvement | <input checked="" type="checkbox"/> Sample of facility records reviewed <input type="checkbox"/> Other (specify):              |
| <input type="checkbox"/> Non-compliant                | <input type="checkbox"/> Sight confirmation by inspector   |
| <input type="checkbox"/> Not reviewed                 | <input checked="" type="checkbox"/> Verbal confirmation by facility staff  |

Comments: Policy #602 addresses inmate classification. The jail utilizes a comprehensive decision-tree questionnaire for an objective classification instrument. There are six (6) Classification and Hearing Specialists assigned to the facility. A spot check of records verified general compliance; however, there are occasional issues with the proper separation of inmates by classification in both buildings.

## SAFETY AND SECURITY PRACTICES

**DOC 350.18 Security.** The jail shall have policies and procedures relating to jail security.

- Portable communications and alarm systems are in good working condition
- Intercom and emergency notification devices are in good working order

**DOC 350.18 (1) Inmate supervision.** The jail shall have a system providing for well-being checks of inmates. Policies and procedures shall provide that all inmates are personally observed by jail security staff at staggered intervals not to exceed the following:  
**(a) 60 minutes (b) 15 minutes for inmates housed on suicide watch.**

- All inmates are personally observed during each physical inspection.
- In housing units of multiple cells, officers are encouraged to complete physical inspections from within the housing unit.

**DOC 350.18 (2) Supplemental observation.** A video monitoring system may be used to supplement but not replace personal observations.

**DOC 350.18 (3) Documentation.** Each observation shall be documented.

| COMPLIANCE  | VERIFICATION   |
|---|--|
| <input type="checkbox"/> Meets standard           | <input checked="" type="checkbox"/> Policy and procedure manual review <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement        | <input checked="" type="checkbox"/> Sample of facility records reviewed <input checked="" type="checkbox"/> Other (specify):   |
| <input checked="" type="checkbox"/> Non-compliant | <input checked="" type="checkbox"/> Sight confirmation by inspector  |
| <input type="checkbox"/> Not reviewed             | <input checked="" type="checkbox"/> Verbal confirmation by facility staff  |

Comments: Policies #603.07 and #613.01 address inmate wellness checks.

A review of records for hourly wellness checks revealed noncompliance, as multiple checks exceeded 60 minutes in length.

A review of records for suicide watches revealed noncompliance, as multiple wellness checks exceeded 15 minutes in length. Of additional concern, the jail log reflects some checks were completed via security camera.

**DOC 350.18 (4) Inmate counts.** Description of the system for physically counting inmates. Formal counts shall be completed and documented at least three times per day, with a minimum of one count per shift.

| COMPLIANCE  | VERIFICATION   |
|---|--|
| <input checked="" type="checkbox"/> Meets standard    | <input checked="" type="checkbox"/> Policy and procedure manual review <input type="checkbox"/> Previous compliance documented |
| <input checked="" type="checkbox"/> Needs improvement | <input checked="" type="checkbox"/> Sample of facility records reviewed <input type="checkbox"/> Other (specify):              |
| <input type="checkbox"/> Non-compliant                | <input type="checkbox"/> Sight confirmation by inspector   |
| <input type="checkbox"/> Not reviewed                 | <input checked="" type="checkbox"/> Verbal confirmation by facility staff  |

Comments: Policy #603.08 addresses inmate counts. A spot check of records verified general compliance; however, there were inconsistencies with how formal counts were documented. Of additional concern, a jail log entry noted one inmate was formally counted via security camera.

**DOC 350.18 (5) Security inspections.** Descriptions of procedures for conducting and documenting facility and area searches.

- Facility and area searches are completed and documented.

| COMPLIANCE  | VERIFICATION   |
|---|--|
| <input checked="" type="checkbox"/> Meets standard    | <input checked="" type="checkbox"/> Policy and procedure manual review <input type="checkbox"/> Previous compliance documented |
| <input checked="" type="checkbox"/> Needs improvement | <input checked="" type="checkbox"/> Sample of facility records reviewed <input type="checkbox"/> Other (specify):              |
| <input type="checkbox"/> Non-compliant                | <input type="checkbox"/> Sight confirmation by inspector   |
| <input type="checkbox"/> Not reviewed                 | <input checked="" type="checkbox"/> Verbal confirmation by facility staff  |

Comments: Policy #603.05 addresses facility searches. A spot check of records verified general compliance; however, not all housing units are getting searched on a [REDACTED] basis.

**DOC 350.18 (6) Inmate searches. Descriptions of procedures for conducting and documenting inmate pat down, strip and body cavity searches.**

| COMPLIANCE                          |                   | VERIFICATION  |   |
|-------------------------------------|-------------------|---|---|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> Policy and procedure manual review    | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input checked="" type="checkbox"/> Sample of facility records reviewed   | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input type="checkbox"/> Sight confirmation by inspector                  |   |
| <input type="checkbox"/>            | Not reviewed      | <input checked="" type="checkbox"/> Verbal confirmation by facility staff |   |

Comments: Policy #603.04 addresses inmate searches. A spot check of records verified staff received annual strip search training in accordance with WI Stat. §968.255.

**DOC 350.18 (7) Door and lock inspections. Monthly inspections shall be made to determine if all jail doors and locks within and to the secure perimeter of the facility are in good working order. Each inspection shall be documented.**

- The remote security controls of doors and locks are all operable.
- All manufacturing doors, locks and releases are repaired in a timely manner.
- The jail staff demonstrate a proficiency in operating all locks, doors and releases.

| COMPLIANCE                          |                   | VERIFICATION  |   |
|-------------------------------------|-------------------|---|---|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> Policy and procedure manual review    | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input checked="" type="checkbox"/> Sample of facility records reviewed   | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input type="checkbox"/> Sight confirmation by inspector                  |   |
| <input type="checkbox"/>            | Not reviewed      | <input checked="" type="checkbox"/> Verbal confirmation by facility staff |   |

Comments: Policies #603.10 and #605.04 address monthly door and lock inspections. A spot check of records verified compliance.

**DOC 350.18 (8) Key control. Control and use of jail keys, including all of the following:**

- (a) All issued keys shall be inventoried and accounted for at shift change
- (b) All keys shall be stored in a secure area and accessible in the event of an emergency
- (c) Inmate are not permitted to handle or utilize jail keys.

| COMPLIANCE                          |                   | VERIFICATION  |   |
|-------------------------------------|-------------------|---|---|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> Policy and procedure manual review    | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input type="checkbox"/> Sample of facility records reviewed              | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input checked="" type="checkbox"/> Sight confirmation by inspector       |   |
| <input type="checkbox"/>            | Not reviewed      | <input checked="" type="checkbox"/> Verbal confirmation by facility staff |   |

Comments: Policy #603.10 addresses key use and storage. Staff become familiar with key use and storage during orientation and jail training.

**DOC 350.18 (9) Weapons control. Introduction, availability, control, inventory, storage and use of firearms, chemical agents, electronic control devices or other related security devices and specification of the level of authority required for their access and use.**

| COMPLIANCE                          |                   | VERIFICATION   |   |
|-------------------------------------|-------------------|--|---|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> Policy and procedure manual review | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input type="checkbox"/> Sample of facility records reviewed           | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input checked="" type="checkbox"/> Sight confirmation by inspector    |   |
| <input type="checkbox"/>            | Not reviewed      | <input type="checkbox"/> Verbal confirmation by facility staff         |   |

Comments: Policies #200.510, #603.11, and #604.02 address weapons control. There are secure lockers located at the entrances to the facility.

**DOC 350.18 (10) Tools and sharps control. Introduction, availability, control, inventory, storage and use of tools and sharps within the facility.**

- Documentation of the control and inventory is maintained

## COMPLIANCE

## VERIFICATION

|  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review    | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input checked="" type="checkbox"/> Sample of facility records reviewed   | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/> Non-compliant             | <input type="checkbox"/> Sight confirmation by inspector                  |   |
| <input type="checkbox"/> Not reviewed              | <input checked="" type="checkbox"/> Verbal confirmation by facility staff |   |

Comments: Policies #603.12 and #609.03 address tools and sharps control.

**DOC 350.19 Fire Safety. The jail shall have policies and procedures relating to fire safety.****DOC 350.19 (2) Each jail shall develop a fire safety policy in accordance with local fire department recommendations that addresses all of the following:**

- Local fire department inspection requirements under sub. (5).
- Fire protection equipment location and maintenance. Each jail shall have and shall properly maintain fire alarms, smoke and thermal detectors, fire extinguishers and self-contained breathing apparatuses which operate for at least 30 minutes.
  - Fire extinguishers are properly maintained with recorded time and date of inspection.
  - Fire extinguishers are properly placed, secured and easily accessible to staff.
  - A fire extinguisher suitable for grease fires is provided in the kitchen.
  - Jail staff can demonstrate proficiency in the use of fire protection equipment.
- Training of staff in equipment use and the evacuation of inmates
  - Staff training is documented.
- A written evacuation plan
  - Jail staff can articulate or demonstrate the evacuation routes and policies of the jail.

## COMPLIANCE

## VERIFICATION

|  |  |   |
|--|--|---|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input type="checkbox"/> Sample of facility records reviewed           | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/> Non-compliant             | <input checked="" type="checkbox"/> Sight confirmation by inspector    |   |
| <input type="checkbox"/> Not reviewed              | <input type="checkbox"/> Verbal confirmation by facility staff         |   |

Comments: Policies #605.01 - #605.05 address fire safety. Fire extinguishers and SCBA's were observed in the facility (staff demonstrated the ability to operate an air pack). A spot check of fire extinguisher tags revealed they are being serviced regularly.

**DOC 350.19 (3) The evacuation route developed as part of the evacuation plan under sub. (2)(d) shall be posted in a conspicuous place for jail staff in the jail.**

## COMPLIANCE

## VERIFICATION

|  |  |   |
|--|--|---|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input type="checkbox"/> Sample of facility records reviewed           | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/> Non-compliant             | <input checked="" type="checkbox"/> Sight confirmation by inspector    |   |
| <input type="checkbox"/> Not reviewed              | <input type="checkbox"/> Verbal confirmation by facility staff         |   |

Comments: Evacuation routes were observed.

**DOC 350.19 (4) Fire safety evacuation and other procedures shall be practiced or simulated by all jail staff at least once every 12 months. Each practice or simulation shall be documented.**

## COMPLIANCE

## VERIFICATION

|  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review    | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input checked="" type="checkbox"/> Sample of facility records reviewed   | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/> Non-compliant             | <input type="checkbox"/> Sight confirmation by inspector                  |   |
| <input type="checkbox"/> Not reviewed              | <input checked="" type="checkbox"/> Verbal confirmation by facility staff |   |

Comments: A spot check of training records verified compliance.

**DOC 350.19 (5) The facility shall be inspected by the local fire department at least once every 12 months and a record thereof shall be maintained.**

- The fire inspection report supports that the facility conforms to applicable fire safety codes.

COMPLIANCE

VERIFICATION

|  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review    | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input checked="" type="checkbox"/> Sample of facility records reviewed   | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/> Non-compliant             | <input type="checkbox"/> Sight confirmation by inspector                  |   |
| <input type="checkbox"/> Not reviewed              | <input checked="" type="checkbox"/> Verbal confirmation by facility staff |   |

Comments: Documentation from the Madison Fire Department verified inspections were completed on 6/7/17 and 11/28/17.

**DOC 350.19 (6) There shall be monthly inspections of the facility to ensure compliance with safety and fire prevention standards. Inspections shall be documented.**

COMPLIANCE

VERIFICATION

|   |   |   |
|---|---|---|
| <input checked="" type="checkbox"/> Meets standard    | <input checked="" type="checkbox"/> Policy and procedure manual review    | <input type="checkbox"/> Previous compliance documented |
| <input checked="" type="checkbox"/> Needs improvement | <input checked="" type="checkbox"/> Sample of facility records reviewed   | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/> Non-compliant                | <input type="checkbox"/> Sight confirmation by inspector                  |   |
| <input type="checkbox"/> Not reviewed                 | <input checked="" type="checkbox"/> Verbal confirmation by facility staff |   |

Comments: Jail policy should be updated to reflect monthly fire safety inspections of the facility (not just equipment). A spot check of records verified compliance.

**DOC 350.22 Use of Force. The jail shall have policies and procedures for the use of force.**

**DOC 350.22 (1) Jail staff may use physical force against an inmate only if force is necessary to change the location of an inmate or to prevent death or bodily injury to the staff member, the inmate or someone else, unlawful damage to property, or the escape of an inmate from the jail. Staff may use only the amount of force reasonably necessary to achieve the objective for which force is used. Corporal punishment of inmates is forbidden.**

COMPLIANCE

VERIFICATION

|  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review  | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input checked="" type="checkbox"/> Sample of facility records reviewed | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/> Non-compliant             | <input type="checkbox"/> Sight confirmation by inspector                |   |
| <input type="checkbox"/> Not reviewed              | <input type="checkbox"/> Verbal confirmation by facility staff          |   |

Comments: Policies #200.460, #200.520, and series #604 address use of force. A spot check of records verified compliance.

**DOC 350.22 (2) Any staff member who has used force to control an inmate or inmates shall submit a written report to the sheriff, jail administrator or the staff member's supervisor describing the incident. The report shall include all known relevant facts and be submitted by the end of the shift, unless otherwise authorized by the sheriff or sheriff's designee.**

- Supervisory review is conducted and documented.

COMPLIANCE

VERIFICATION

|   |   |   |
|---|---|---|
| <input checked="" type="checkbox"/> Meets standard    | <input checked="" type="checkbox"/> Policy and procedure manual review  | <input type="checkbox"/> Previous compliance documented |
| <input checked="" type="checkbox"/> Needs improvement | <input checked="" type="checkbox"/> Sample of facility records reviewed | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/> Non-compliant                | <input type="checkbox"/> Sight confirmation by inspector                |   |
| <input type="checkbox"/> Not reviewed                 | <input type="checkbox"/> Verbal confirmation by facility staff          |   |

Comments: Jail policy should be updated to reflect the aforementioned standard for all use of force situations within the facility (not just cell entries/extractions).



**DOC 350.23 Use of restraints.** The jail shall have policies and procedures governing the use of restraints and control devices.

**DOC 350.23 (1) Restraint devices are never used as punishment and are not applied longer than necessary.**

- Inventories are conducted and documented.

**DOC 350.23 (2) When an inmate is mechanically restrained for non-routine purposes, a written report must be completed by the end of the shift, unless otherwise authorized by the sheriff or sheriff's designee. Documentation shall include the reason for use, duration of use and corresponding wellness checks.**

- Supervisory review is conducted and documented

| COMPLIANCE                          |                   | VERIFICATION  |   |
|-------------------------------------|-------------------|---|---|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> Policy and procedure manual review    | <input type="checkbox"/> Previous compliance documented |
| <input checked="" type="checkbox"/> | Needs improvement | <input checked="" type="checkbox"/> Sample of facility records reviewed   | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input type="checkbox"/> Sight confirmation by inspector                  |   |
| <input type="checkbox"/>            | Not reviewed      | <input checked="" type="checkbox"/> Verbal confirmation by facility staff |   |

Comments: **Policy #604.01 addresses use of restraints. A spot check of records verified general compliance; however, staff reports for one incident did not reflect the total time an inmate spent in a restraint chair.**

**DOC 350.24 Discipline.** The jail shall have policies and procedures outlining inmate discipline and due process.

**DOC 350.24 (1) Inmates rules of behavior.** Every jail shall have written rules of behavior for inmates. At the time of admission, each person shall be notified verbally of the existence of jail rules for inmate behavior and the potential disciplinary actions for violations of the rules. Each inmate shall be provided with a copy of the jail rules or copies of the rules shall be posted in conspicuous places in the jail.

**DOC 350.24 (2) Discipline for minor violation. (See code for specific language.)**

- A minor discipline is a verbal or written reprimand, restriction of privileges or placement in disciplinary segregation for 24 hours or less.
- Inmate is informed of violation, potential discipline and disciplinary procedures for minor violations.
- Inmate has opportunity to make verbal statement about alleged violation to a staff member
- Staff member may impose a minor discipline if found that violation occurred
- Supervisor is informed of incident by staff member. If supervisor concludes violation is major, then it shall be handled in accordance with Sub. (3). If supervisor finds that no violation occurred, the inmate shall be notified that the charge has been dismissed.
- Inmate is notified of right to appeal and of appeal procedure.
- Information made part of inmate's file. If supervisor finds no violation occurred, the due process records shall reflect those findings.

**DOC350.24 (3) Discipline for major violation. (See code for specific language.)**

- A major discipline is restriction of privileges for more than 24 hours, placement in solitary confinement for more than 24 hours in accordance with s. 302.40, Stats., loss of good time in accordance with s. 302.43, Stats., restrictions affecting Huber law privileges in accordance s. 303.08, Stats., or restrictions affecting work release in accordance with s. 303.065, Stats.
- Written report to supervisor within 24 hours of incident
- Inmate notification of charges and right to hearing 24 hours in advance of hearing.
- Due process hearing within seven calendar days, unless inmate waives the right to a due process hearing.
  - Impartial hearing officer or committee (not involved in incident)
  - Inmate's right to be present at hearing, make a statement and present evidence. Reason for inmate's absence documented.
  - Inmate's right to present witnesses. Reason for absence of witness documented.
  - Inmate's right to staff advocate if inmate is illiterate or if issues are complex.
  - Hearing officer may consider inmate's mental illness, developmental disability or other emotional or mental disability as a mitigating factor in imposing discipline.
  - Written decision stating discipline administered. Copy to inmate.
  - Inmate is notified of right to appeal and appeal procedure
  - Incident information, discipline administered and decision shall be made part of inmate file. If found no violation occurred, the due process records shall reflect those findings.
- If inmate waives right to a due process hearing, violation shall be disposed of in accordance with procedures for minor violations. Major discipline may be imposed if relevant staff member finds a violation occurred. Waiver does not constitute an admission of the alleged violation.

**350.24(4) Classification.** An inmate may be evaluated for custody classification following the imposition of discipline.

| COMPLIANCE                          |                   | VERIFICATION  |   |
|-------------------------------------|-------------------|---|---|
| <input type="checkbox"/>            | Meets standard    | <input checked="" type="checkbox"/> Policy and procedure manual review  | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input checked="" type="checkbox"/> Sample of facility records reviewed | <input type="checkbox"/> Other (specify):               |
| <input checked="" type="checkbox"/> | Non-compliant     | <input type="checkbox"/> Sight confirmation by inspector                |   |



☐ Not reviewed ☒ Verbal confirmation by facility staff

Comments: Policy series #607 addresses inmate discipline (although it should be updated to reflect all of the aforementioned requirements). A spot check of records verified general compliance; however, documentation of applicable minor disciplinary procedures was limited in staff incident reports.

Of additional concern during the inspection, an inmate had been in "lockdown" status for a week and had yet to receive any disciplinary paperwork or hearing.

## HEALTH CARE

**DOC 350.13 Inmate health screening. The jail shall have policies and procedures for inmate health screening.**

**DOC 350.13 (1) Use of a health screening form that is developed in conjunction with health care professionals and is used at booking with each inmate to record information about medical, mental health and dental conditions, physical and developmental disabilities, alcohol or other drug abuse problems and suicide risk.**

**DOC 350.13 (2) Referrals to medical, mental health or supervisory staff in a timely manner in response to identified concerns. If urgent concerns are identified, the referral shall be immediate.**

**DOC 350.13 (3) Review of the health screening form by health care or other designated staff within 72 hours if non-urgent concerns are identified.**

- Review by health care provider is conducted and documented.

**DOC 350.13 (4) Documentation of health screening results and subsequent review of the health screening form in an inmate's confidential file.**

- Health screening forms are legible, accurate and complete, including detailed narratives when necessary.
- Health care professionals provided input into the content of the health screening form.
- The health screening form contains usable information relating to the inmate's medical condition, dental condition, medical disabilities, developmental disabilities, alcohol and other drug abuse and suicide risk.
- A health screening form is completed for each inmate booked into the facility.
- The health screening forms are reviewed for completeness, accuracy, legibility and the appropriateness of the decisions made regarding referral, housing, classification and other actions.
- The identity of the person completing the health screening form is documented.

### COMPLIANCE

### VERIFICATION

|  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review    | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input checked="" type="checkbox"/> Sample of facility records reviewed   | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/> Non-compliant             | <input type="checkbox"/> Sight confirmation by inspector                  |   |
| <input type="checkbox"/> Not reviewed              | <input checked="" type="checkbox"/> Verbal confirmation by facility staff |   |

Comments: Policies #601.02 and #612.03 address the intake screening process. A health screening form is completed on inmates by the intake nurse (completed forms were observed in individual medical files).

**DOC 350.13 (5) A health appraisal that is to be completed within 14 days after arrival at the facility unless a health appraisal has been completed by health care staff within the previous 90 days. The health appraisal shall be completed by health care staff in accordance with protocols established by the responsible physician.**

### COMPLIANCE

### VERIFICATION

|  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review    | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input checked="" type="checkbox"/> Sample of facility records reviewed   | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/> Non-compliant             | <input type="checkbox"/> Sight confirmation by inspector                  |   |
| <input type="checkbox"/> Not reviewed              | <input checked="" type="checkbox"/> Verbal confirmation by facility staff |   |

Comments: A spot check of records verified compliance.

**DOC 350.14 Inmate health care.** There shall be sufficient equipment, material, space and supplies for the performance of health care services in a confidential manner.

COMPLIANCE

VERIFICATION

|                                     |                   |                                     |                                       |                          |                                |
|-------------------------------------|-------------------|-------------------------------------|---------------------------------------|--------------------------|--------------------------------|
| <input checked="" type="checkbox"/> | Meets standard    | <input type="checkbox"/>            | Policy and procedure manual review    | <input type="checkbox"/> | Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input type="checkbox"/>            | Sample of facility records reviewed   | <input type="checkbox"/> | Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input checked="" type="checkbox"/> | Sight confirmation by inspector       |                          |                                |
| <input type="checkbox"/>            | Not reviewed      | <input checked="" type="checkbox"/> | Verbal confirmation by facility staff |                          |                                |

Comments: While small for a facility of this size, there is space for medical staff to see inmates and to securely store medications/records/equipment.

**DOC 350.14 (1) The sheriff shall provide or secure necessary medical and mental health treatment and emergency dental care for inmates in custody.**

- Jail provides a specific form for inmates to request medical assessment or treatment.
- All inmate requests for medical care are reviewed by health care staff.
- The dispositions of the inmate medical requests are documented by health care staff members.

COMPLIANCE

VERIFICATION

|                                     |                   |                                     |                                       |                                     |                                |
|-------------------------------------|-------------------|-------------------------------------|---------------------------------------|-------------------------------------|--------------------------------|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> | Policy and procedure manual review    | <input type="checkbox"/>            | Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input checked="" type="checkbox"/> | Sample of facility records reviewed   | <input checked="" type="checkbox"/> | Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input checked="" type="checkbox"/> | Sight confirmation by inspector       |                                     |                                |
| <input type="checkbox"/>            | Not reviewed      | <input checked="" type="checkbox"/> | Verbal confirmation by facility staff |                                     |                                |

Comments:

**DOC 350.14 (3) Health care staff shall be in compliance with state and federal licensure certification and registration. Verification of compliance shall be maintained at the facility.**

COMPLIANCE

VERIFICATION

|                                     |                   |                                     |                                       |                          |                                |
|-------------------------------------|-------------------|-------------------------------------|---------------------------------------|--------------------------|--------------------------------|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> | Policy and procedure manual review    | <input type="checkbox"/> | Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input checked="" type="checkbox"/> | Sample of facility records reviewed   | <input type="checkbox"/> | Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input type="checkbox"/>            | Sight confirmation by inspector       |                          |                                |
| <input type="checkbox"/>            | Not reviewed      | <input checked="" type="checkbox"/> | Verbal confirmation by facility staff |                          |                                |

Comments: Documentation of licensure was observed.

**DOC 350.14 (4) Medical records shall be kept separate from other records and shall be maintained in a confidential manner in accordance with s. 146.81 to s. 146.83, Stats., and any other applicable state or federal laws.**

- Medical record accessibility is limited to medical staff, the jail administrator and the administrator's designees as appropriate.

COMPLIANCE

VERIFICATION

|                                     |                   |                                     |                                       |                          |                                |
|-------------------------------------|-------------------|-------------------------------------|---------------------------------------|--------------------------|--------------------------------|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> | Policy and procedure manual review    | <input type="checkbox"/> | Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input checked="" type="checkbox"/> | Sample of facility records reviewed   | <input type="checkbox"/> | Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input checked="" type="checkbox"/> | Sight confirmation by inspector       |                          |                                |
| <input type="checkbox"/>            | Not reviewed      | <input checked="" type="checkbox"/> | Verbal confirmation by facility staff |                          |                                |

Comments: Electronic medical records are securely managed.

**DOC 350.14 (6) Officers shall receive documented annual training on health care policies and procedures, medications and health screening at the time of admission.**

COMPLIANCE

VERIFICATION

|                                     |                   |                                     |                                       |                          |                                |
|-------------------------------------|-------------------|-------------------------------------|---------------------------------------|--------------------------|--------------------------------|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> | Policy and procedure manual review    | <input type="checkbox"/> | Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input checked="" type="checkbox"/> | Sample of facility records reviewed   | <input type="checkbox"/> | Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input type="checkbox"/>            | Sight confirmation by inspector       |                          |                                |
| <input type="checkbox"/>            | Not reviewed      | <input checked="" type="checkbox"/> | Verbal confirmation by facility staff |                          |                                |

Comments: A spot check of training records verified compliance.

**DOC 350.15 Health care policy. The jail shall have policies and procedures for inmate health care.**

**DOC 350.15 (1) Documentation of health referrals made or health care provided.**

**DOC 350.15 (2) Maintenance of documents in an inmate's confidential file.**

| COMPLIANCE   | VERIFICATION   |
|--|--|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input checked="" type="checkbox"/> Sample of facility records reviewed <input type="checkbox"/> Other (specify):              |
| <input type="checkbox"/> Non-compliant             | <input type="checkbox"/> Sight confirmation by inspector   |
| <input type="checkbox"/> Not reviewed              | <input checked="" type="checkbox"/> Verbal confirmation by facility staff  |

Comments:

**DOC 350.15 (3) Names, addresses and telephone numbers of health care providers or agencies who have agreed to provide emergency and routine health care services for inmates.**

- Contact information is available to staff.

| COMPLIANCE   | VERIFICATION   |
|--|--|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input type="checkbox"/> Sample of facility records reviewed <input type="checkbox"/> Other (specify):                         |
| <input type="checkbox"/> Non-compliant             | <input type="checkbox"/> Sight confirmation by inspector   |
| <input type="checkbox"/> Not reviewed              | <input checked="" type="checkbox"/> Verbal confirmation by facility staff  |

Comments:

**DOC 350.15 (4) Referral of an inmate to jail health care staff or to other agencies that provide health care.**

- Health care referrals are made and documented.
- Staff are knowledgeable about the health care referral process.

| COMPLIANCE   | VERIFICATION   |
|--|--|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input checked="" type="checkbox"/> Sample of facility records reviewed <input type="checkbox"/> Other (specify):              |
| <input type="checkbox"/> Non-compliant             | <input type="checkbox"/> Sight confirmation by inspector   |
| <input type="checkbox"/> Not reviewed              | <input checked="" type="checkbox"/> Verbal confirmation by facility staff  |

Comments:

**DOC 350.15 (5) Designation of staff who have authority to make health care decisions, including emergency medical and dental care.**

**DOC 350.15 (6) Non-emergency health care, including the use of an inmate's personal physician.**

| COMPLIANCE   | VERIFICATION   |
|--|--|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input checked="" type="checkbox"/> Sample of facility records reviewed <input type="checkbox"/> Other (specify):              |
| <input type="checkbox"/> Non-compliant             | <input type="checkbox"/> Sight confirmation by inspector   |
| <input type="checkbox"/> Not reviewed              | <input checked="" type="checkbox"/> Verbal confirmation by facility staff  |

Comments:

**DOC 350.15 (7) Schedule of inmate access to routine medical care.**

- The schedule of inmate access to medical care is provided to inmates in writing via handbook, posted notice, inmate rule and regulation list, or other appropriate means.
- An alternative means for inmates to access medical care is provided if the inmates are unable to read or write.

COMPLIANCE

VERIFICATION

|                                     |                   |                                     |                                       |                                     |                                |
|-------------------------------------|-------------------|-------------------------------------|---------------------------------------|-------------------------------------|--------------------------------|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> | Policy and procedure manual review    | <input type="checkbox"/>            | Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input checked="" type="checkbox"/> | Sample of facility records reviewed   | <input checked="" type="checkbox"/> | Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input checked="" type="checkbox"/> | Sight confirmation by inspector       |                                     |                                |
| <input type="checkbox"/>            | Not reviewed      | <input checked="" type="checkbox"/> | Verbal confirmation by facility staff |                                     |                                |

Comments: Medical services are provided by Correct Care Solutions (nursing coverage is 24/7, physician coverage is 40 hours/week, and dental coverage is 16 hours/week). Access to healthcare is outlined in the jail rules. It was reported if an inmate cannot read or write, the process will be explained to them.

It is noteworthy that the Dane County Jail has received accreditation from the National Commission on Correctional Health Care (NCCCHC). The facility was first accredited in 2004 and their continued compliance demonstrates a commitment to ensuring best practices.

**DOC 350.15 (8) Provision for inmates with chronic medical conditions.**

COMPLIANCE

VERIFICATION

|                                     |                   |                                     |                                       |                          |                                |
|-------------------------------------|-------------------|-------------------------------------|---------------------------------------|--------------------------|--------------------------------|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> | Policy and procedure manual review    | <input type="checkbox"/> | Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input type="checkbox"/>            | Sample of facility records reviewed   | <input type="checkbox"/> | Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input type="checkbox"/>            | Sight confirmation by inspector       |                          |                                |
| <input type="checkbox"/>            | Not reviewed      | <input type="checkbox"/>            | Verbal confirmation by facility staff |                          |                                |

Comments:

**DOC 350.15 (9) Procedure for processing inmate medical requests on a daily basis.**

- Inmate medical requests are documented on an official medical request form.
- Written disposition of medical requests are retained in inmate's confidential medical file.

COMPLIANCE

VERIFICATION

|                                     |                   |                                     |                                       |                                     |                                |
|-------------------------------------|-------------------|-------------------------------------|---------------------------------------|-------------------------------------|--------------------------------|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> | Policy and procedure manual review    | <input type="checkbox"/>            | Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input checked="" type="checkbox"/> | Sample of facility records reviewed   | <input checked="" type="checkbox"/> | Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input type="checkbox"/>            | Sight confirmation by inspector       |                                     |                                |
| <input type="checkbox"/>            | Not reviewed      | <input checked="" type="checkbox"/> | Verbal confirmation by facility staff |                                     |                                |

Comments: Inmates are able to submit healthcare requests on a daily basis (completed requests were observed).

**DOC 350.15 (10) Documentation in an inmate's confidential medical file of any referral and identification of the services provided, including emergency services.**

- Health care services provided or refused are documented in the inmate's confidential medical file.

COMPLIANCE

VERIFICATION

|                                     |                   |                                     |                                       |                          |                                |
|-------------------------------------|-------------------|-------------------------------------|---------------------------------------|--------------------------|--------------------------------|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> | Policy and procedure manual review    | <input type="checkbox"/> | Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input checked="" type="checkbox"/> | Sample of facility records reviewed   | <input type="checkbox"/> | Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input type="checkbox"/>            | Sight confirmation by inspector       |                          |                                |
| <input type="checkbox"/>            | Not reviewed      | <input type="checkbox"/>            | Verbal confirmation by facility staff |                          |                                |

Comments:

**DOC 350.15 (11) Provision of special diet if ordered by a qualified health care professional.**

- Special diets ordered by a qualified health care professional are documented in the inmate's confidential medical file.
- The jail health care providers, food service providers, and correctional staff are notified of special diets ordered by a qualified health care professional.

**COMPLIANCE**

**VERIFICATION**

|  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review    | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input checked="" type="checkbox"/> Sample of facility records reviewed   | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/> Non-compliant             | <input type="checkbox"/> Sight confirmation by inspector                  |   |
| <input type="checkbox"/> Not reviewed              | <input checked="" type="checkbox"/> Verbal confirmation by facility staff |   |

Comments: **Policy #609.04 addresses medical diets. Alleged food allergies and medical diets are reviewed by the health authority (special diet sheets were observed).**

**DOC 350.15 (12) Pregnancy management.**

**COMPLIANCE**

**VERIFICATION**

|  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review    | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input type="checkbox"/> Sample of facility records reviewed              | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/> Non-compliant             | <input type="checkbox"/> Sight confirmation by inspector                  |   |
| <input type="checkbox"/> Not reviewed              | <input checked="" type="checkbox"/> Verbal confirmation by facility staff |   |

Comments:

**DOC 350.15 (13) Maintenance of agreements between the jail and providers of health care services.**

**COMPLIANCE**

**VERIFICATION**

|  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review    | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input type="checkbox"/> Sample of facility records reviewed              | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/> Non-compliant             | <input type="checkbox"/> Sight confirmation by inspector                  |   |
| <input type="checkbox"/> Not reviewed              | <input checked="" type="checkbox"/> Verbal confirmation by facility staff |   |

Comments:

**DOC 350.15 (14) Use of health transfer summary form under s. 302.388 (2), Stats.**

**Wisconsin State Statute 302.388 Prisoner medical records.**

**(2) HEALTH SUMMARY FORM.**

- (a) The department shall provide each jailer a standardized form for recording the medical conditions and history of prisoners being transferred to the department or another county's jail. Except as provided in pars. (b) and (bm), jail medical staff shall complete the form and provide it to the receiving institution intake staff at the time of each such transfer.
- (b) If the jail does not have medical staff on duty at the time of a transfer, the jailer or his or her designee shall complete as much of the form as possible and provide it to the receiving institution intake staff at the time of the transfer. The jailer shall ensure that all of the following occur within 24 hours after the transfer.
1. The jail medical staff, the prisoner's health care provider or, if the prisoner does not have a health care provider, a health care provider under contract with the jail reviews the form provided to the receiving institution at the time of the transfer.
  2. The medical staff or health care provider reviewing the form corrects any errors in the form and includes in it any additional available information.
  3. The medical staff or health care provider reviewing the form transmits the updated form or the information included on the form by the quickest available means to the receiving institution intake staff.
- (bm) Jail medical staff need not complete the form if the jailer or his or her designee provides a copy of the prisoner's complete medical file to the receiving institution intake staff at the time of the transfer.
- (f) Receiving institution intake staff may make a health summary form available to any of the following:
1. The prison's or jail's medical staff.
  2. A prisoner's healthcare provider.
  3. In the case of a prison or jail that does not have medical staff on duty at the time of the transfer, a health care provider designated by the department or the jailer to review health summary forms.
  4. In the case of a jail that does not have medical staff, a person designated by the jailer to maintain prisoner medical records.

| COMPLIANCE                          |                   | VERIFICATION                        |                                       |
|-------------------------------------|-------------------|-------------------------------------|---------------------------------------|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> | Policy and procedure manual review    |
| <input type="checkbox"/>            | Needs improvement | <input checked="" type="checkbox"/> | Sample of facility records reviewed   |
| <input type="checkbox"/>            | Non-compliant     | <input type="checkbox"/>            | Sight confirmation by inspector       |
| <input type="checkbox"/>            | Not reviewed      | <input checked="" type="checkbox"/> | Verbal confirmation by facility staff |

Comments: **Policy #610.075 addresses use of the health transfer summary form. Healthcare staff are responsible for the completion of HTS forms (completed forms were observed in individual medical files).**

**DOC 350.15 (15) Communicable disease and infection control. Policies and procedures relating to communicable disease and infection control shall contain all of the following components:**

- (a) Provision of treatment and supervision of inmates during isolation or quarantine under s. 252.06(6)(b), Stats.
- (b) Documentation of the need for isolation or quarantine under s. 252.06(6)(b), Stats., in the inmate's confidential medical file.
- (c) Provision of laboratory screening for inmates who may have been exposed to a communicable disease if ordered by medical personnel.
- (d) Provision for handling bio-hazardous waste and decontaminating medical and dental equipment in accordance with regulations.

| COMPLIANCE                          |                   | VERIFICATION                        |                                       |
|-------------------------------------|-------------------|-------------------------------------|---------------------------------------|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> | Policy and procedure manual review    |
| <input type="checkbox"/>            | Needs improvement | <input type="checkbox"/>            | Sample of facility records reviewed   |
| <input type="checkbox"/>            | Non-compliant     | <input type="checkbox"/>            | Sight confirmation by inspector       |
| <input type="checkbox"/>            | Not reviewed      | <input type="checkbox"/>            | Verbal confirmation by facility staff |

Comments: **Policies #608.04 and #611.01 - #611.05 address communicable diseases.**

**DOC 350.15 (16) Detoxification and management of intoxicated inmates.**

- Appropriate housing and supervision is provided.

| COMPLIANCE                          |                   | VERIFICATION                        |                                       |
|-------------------------------------|-------------------|-------------------------------------|---------------------------------------|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> | Policy and procedure manual review    |
| <input type="checkbox"/>            | Needs improvement | <input checked="" type="checkbox"/> | Sample of facility records reviewed   |
| <input type="checkbox"/>            | Non-compliant     | <input type="checkbox"/>            | Sight confirmation by inspector       |
| <input type="checkbox"/>            | Not reviewed      | <input checked="" type="checkbox"/> | Verbal confirmation by facility staff |

Comments:

**DOC 350.16 Control and administration of medications. The jail shall have policies and procedures relating to the control, delivery and administration of prescription and non-prescription medications.**

**DOC 350.16 (1) A qualified health care professional shall prescribe medications and order treatments.**

| COMPLIANCE                          |                   | VERIFICATION                        |                                       |
|-------------------------------------|-------------------|-------------------------------------|---------------------------------------|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> | Policy and procedure manual review    |
| <input type="checkbox"/>            | Needs improvement | <input checked="" type="checkbox"/> | Sample of facility records reviewed   |
| <input type="checkbox"/>            | Non-compliant     | <input type="checkbox"/>            | Sight confirmation by inspector       |
| <input type="checkbox"/>            | Not reviewed      | <input type="checkbox"/>            | Verbal confirmation by facility staff |

Comments: **Policies #610.05 and #610.06 address inmate medications.**

**DOC 350.16 (2) Designated trained staff may administer or deliver prescribed doses of medication at prescribed times. Annual documented training shall be provided to jail staff that deliver medications.**

| COMPLIANCE                          |                   | VERIFICATION                        |                                       |
|-------------------------------------|-------------------|-------------------------------------|---------------------------------------|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> | Policy and procedure manual review    |
| <input type="checkbox"/>            | Needs improvement | <input checked="" type="checkbox"/> | Sample of facility records reviewed   |
| <input type="checkbox"/>            | Non-compliant     | <input type="checkbox"/>            | Sight confirmation by inspector       |
| <input type="checkbox"/>            | Not reviewed      | <input checked="" type="checkbox"/> | Verbal confirmation by facility staff |

Comments: **The healthcare staff are responsible for preparing and delivering medications to inmates (med pass occurs five times a day or as directed). A spot check of records verified staff received annual medication administration**

training.

**DOC 350.16 (3) Determination by appropriate personnel that all medications brought in by inmates or other persons for an inmate are necessary.**

- Verification of prescription medication is performed by a health care provider or an appropriately trained designee.

| COMPLIANCE                          |                   | VERIFICATION  |   |
|-------------------------------------|-------------------|---|---|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> Policy and procedure manual review    | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input checked="" type="checkbox"/> Sample of facility records reviewed   | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input type="checkbox"/> Sight confirmation by inspector                  |   |
| <input type="checkbox"/>            | Not reviewed      | <input checked="" type="checkbox"/> Verbal confirmation by facility staff |   |

Comments: Healthcare staff are responsible for the verification of all medications brought into the jail.

**DOC 350.16 (4) All medications brought into the jail shall be inventoried and placed in secure storage.**

**DOC 350.16 (5) Any medications kept at the jail shall be stored in a locked drug cabinet that is not accessible to inmates.**

- The storage of inmate medications makes them readily identifiable.
- Medications that require refrigeration are kept in a separate, medical refrigerator, unless the medications are secured in a separate, locked container stored in a refrigerator inaccessible to inmates.

| COMPLIANCE                          |                   | VERIFICATION  |   |
|-------------------------------------|-------------------|---|---|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> Policy and procedure manual review    | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input checked="" type="checkbox"/> Sample of facility records reviewed   | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input checked="" type="checkbox"/> Sight confirmation by inspector       |   |
| <input type="checkbox"/>            | Not reviewed      | <input checked="" type="checkbox"/> Verbal confirmation by facility staff |   |

Comments: Medications brought into the facility are documented and securely stored [REDACTED].

**DOC 350.16 (6) Administration or delivery of prescription and nonprescription medications to inmates.**

- Personnel authorized to administer medications are listed in the current policy and procedure manual and accessible to all jail staff.

| COMPLIANCE                          |                   | VERIFICATION  |   |
|-------------------------------------|-------------------|---|---|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> Policy and procedure manual review    | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input checked="" type="checkbox"/> Sample of facility records reviewed   | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input type="checkbox"/> Sight confirmation by inspector                  |   |
| <input type="checkbox"/>            | Not reviewed      | <input checked="" type="checkbox"/> Verbal confirmation by facility staff |   |

Comments:

**DOC 350.16 (7) Medication administered or delivered to an inmate shall be documented, including who prescribed the medication, who administered or delivered the medication, and the date and time of administration or delivery.**

**DOC 350.16 (8) All refusals of recommended or prescribed medications by an inmate shall be documented. A health care professional shall monitor the inmate in accordance with requirements of s. 302.384, Stats.**

- All medication documentation is complete, accurate, and legible.
- The name of the pharmacist or qualified health care professional, the full (not abbreviated) name of the medication, the dosage and frequency, the date and time of administration or delivery, and any special instructions or comments are documented for each prescription medication.
- The medication administration and delivery records are reviewed by the health care provider and/or jail administrator or designee for completeness, accuracy, and legibility.
- There are no unexplained gaps in the documentation and inmate refusals of medication are clearly indicated and documented.

| COMPLIANCE                          |                   | VERIFICATION  |   |
|-------------------------------------|-------------------|---|---|
| <input type="checkbox"/>            | Meets standard    | <input checked="" type="checkbox"/> Policy and procedure manual review  | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input checked="" type="checkbox"/> Sample of facility records reviewed | <input type="checkbox"/> Other (specify):               |
| <input checked="" type="checkbox"/> | Non-compliant     | <input type="checkbox"/> Sight confirmation by inspector                |   |
| <input type="checkbox"/>            | Not reviewed      | <input type="checkbox"/> Verbal confirmation by facility staff          |   |



Comments: A spot check of MAR's revealed noncompliance, as a couple of unexplained gaps were observed.

**DOC 350.16 (9) Return of an inmate's medication inventoried at admission.**

**DOC 350.16 (10) Inventory or disposal of unused medications upon the inmate's release or transfer.**

- The return of an inmate's medication is documented.
- Unused medication is disposed of by a health care provider, transferred with the inmate, or returned to a pharmacy.
- Established protocols regarding the disposal of narcotic medications, including witness presence, are followed.
- Documentation of the disposition of the medication is retained in the inmate's medical file.

COMPLIANCE

VERIFICATION

|  |  |   |
|--|--|---|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input type="checkbox"/> Sample of facility records reviewed           | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/> Non-compliant             | <input type="checkbox"/> Sight confirmation by inspector               |   |
| <input type="checkbox"/> Not reviewed              | <input type="checkbox"/> Verbal confirmation by facility staff         |   |

Comments:

**HIGH RISK SUPERVISION**

**DOC 350.17 Suicide prevention. The jail shall have policies and procedures relating to the supervision and housing of inmates who may be at risk of seriously injuring themselves.**

COMPLIANCE

VERIFICATION

|  |  |   |
|--|--|---|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input type="checkbox"/> Sample of facility records reviewed           | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/> Non-compliant             | <input type="checkbox"/> Sight confirmation by inspector               |   |
| <input type="checkbox"/> Not reviewed              | <input type="checkbox"/> Verbal confirmation by facility staff         |   |

Comments: Policies #601.01, #601.02, and series #613 address suicide prevention.

**DOC 350.17 (1) Obtaining documented information from the arresting or transporting agency to assess an inmate's potential for suicide or self-harm.**

COMPLIANCE

VERIFICATION

|  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review    | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input checked="" type="checkbox"/> Sample of facility records reviewed   | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/> Non-compliant             | <input type="checkbox"/> Sight confirmation by inspector                  |   |
| <input type="checkbox"/> Not reviewed              | <input checked="" type="checkbox"/> Verbal confirmation by facility staff |   |

Comments: This information is captured on the pre-booking medical screening form.

**DOC 350.17 (2) Intake screening of inmates that includes interview items and staff observation related to potential suicide risk.**

- Intake screening is performed on each new inmate.
- The answers to all screening questions are documented.
- The screening form is legible, accurate, and complete, including detailed narratives when necessary.
- Appropriate follow-up questions are asked and answers recorded, when suicide risk is indicated.
- Medical or mental health care professionals review intake screening reports when risk is indicated.
- A secondary security review of intake screening reports for completeness, accuracy, legibility, consistency, appropriateness of housing assignments, appropriateness of classification and risk assessments is conducted.

COMPLIANCE

VERIFICATION

|  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review    | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input checked="" type="checkbox"/> Sample of facility records reviewed   | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/> Non-compliant             | <input type="checkbox"/> Sight confirmation by inspector                  |   |
| <input type="checkbox"/> Not reviewed              | <input checked="" type="checkbox"/> Verbal confirmation by facility staff |   |

Comments: As a part of the intake screening process, mental health questions are asked of each inmate. If the inmate's answers or behavior suggest a risk of suicidal ideation, then that automatically generates a new protocol for further assessment and evaluation. Completed screening forms were observed in individual medical files.



**DOC 350.17 (3) Procedure for placement of an inmate on suicide watch. Policies and procedures relating to the procedure for placing an inmate on suicide watch shall include all of the following components:**

- a) Immediate notification to designated supervisory staff if an inmate is identified as a suicide risk.
- b) Designation of housing areas and security precautions for inmates who are placed on suicide watch.
- c) Description of monitoring procedures for inmates on suicide watch, including frequency and documentation of wellness checks.

**COMPLIANCE**

**VERIFICATION**

|  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review    | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input checked="" type="checkbox"/> Sample of facility records reviewed   | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/> Non-compliant             | <input type="checkbox"/> Sight confirmation by inspector                  |   |
| <input type="checkbox"/> Not reviewed              | <input checked="" type="checkbox"/> Verbal confirmation by facility staff |   |

Comments: Inmates placed on a suicide watch in the CCB are generally housed in units 719 (women) and 623 (men). Suicide watch placements in the PSB are generally in the restrictive housing units on the first floor.

**DOC 350.17 (4) Identification of trained persons who may assess an inmate's level of suicide risk.**

**COMPLIANCE**

**VERIFICATION**

|  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review    | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input checked="" type="checkbox"/> Sample of facility records reviewed   | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/> Non-compliant             | <input checked="" type="checkbox"/> Sight confirmation by inspector       |   |
| <input type="checkbox"/> Not reviewed              | <input checked="" type="checkbox"/> Verbal confirmation by facility staff |   |

Comments: Mental health services are coordinated through Correct Care Solutions. Staff coverage is as follows: Masters Level Social Worker - 24/7, Mental Health Director - 40 hrs/week, Psychiatrist - 16 hrs/week, Psych. Nurse - 40 hrs/week, and Discharge Planner - 40 hrs/week.

**DOC 350.17 (5) Notification to qualified mental health professionals within 12 hours of placement of a potentially suicidal inmate on suicide watch. Assessment by a qualified mental health professional shall be completed as soon as practicable.**

- Recommendations and decisions from qualified mental health professional are documented and maintained at the jail.

**COMPLIANCE**

**VERIFICATION**

|  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review  | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input checked="" type="checkbox"/> Sample of facility records reviewed | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/> Non-compliant             | <input type="checkbox"/> Sight confirmation by inspector                |   |
| <input type="checkbox"/> Not reviewed              | <input type="checkbox"/> Verbal confirmation by facility staff          |   |

Comments:

**DOC 350.17 (6) Identification of qualified mental health professionals who are authorized to remove an inmate from a suicide watch status after an on-site face-to-face assessment.**

**COMPLIANCE**

**VERIFICATION**

|  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review    | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input checked="" type="checkbox"/> Sample of facility records reviewed   | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/> Non-compliant             | <input type="checkbox"/> Sight confirmation by inspector                  |   |
| <input type="checkbox"/> Not reviewed              | <input checked="" type="checkbox"/> Verbal confirmation by facility staff |   |

Comments:

**DOC 350.17 (7) Frequency of communication between health care and jail personnel regarding the status of an inmate who is on suicide watch.**

- A clear and reliable means of communicating information between correctional staff members regarding inmates who are suicide risks is utilized.
- All communication between jail staff, administration, and medical/mental health care providers is documented, including names of those involved, summary of content of discussion, and actions taken.

**COMPLIANCE****VERIFICATION**

|  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review    | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input checked="" type="checkbox"/> Sample of facility records reviewed   | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/> Non-compliant             | <input checked="" type="checkbox"/> Sight confirmation by inspector       |   |
| <input type="checkbox"/> Not reviewed              | <input checked="" type="checkbox"/> Verbal confirmation by facility staff |   |

Comments: Applicable information is disseminated between shifts and documented. The jail has several multi-disciplinary committees which meet regularly to review medical/mental health related issues (e.g. monthly community mental health meetings, weekly SPIRS meetings, monthly MAC meetings, restrictive housing meetings, medical administration committee, etc.).

**DOC 350.17 (8) Intervention protocol during an apparent suicide attempt, including life-sustaining measures.**

- Staff demonstrate a working knowledge of first aid and emergency response measures.
- Staff are familiar with the location and effective use of emergency response equipment.
- Staff received training on emergency response, including use of emergency response equipment within the past evaluation period.
- The actions taken in response to a suicide in progress or suicide threat are documented.

**COMPLIANCE****VERIFICATION**

|  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review    | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input type="checkbox"/> Sample of facility records reviewed              | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/> Non-compliant             | <input checked="" type="checkbox"/> Sight confirmation by inspector       |   |
| <input type="checkbox"/> Not reviewed              | <input checked="" type="checkbox"/> Verbal confirmation by facility staff |   |

Comments: Emergency response equipment and cutdown tools are maintained in the facility (staff are able to identify where they are located).

**DOC 350.17 (9) Identification of persons to be notified in case of attempted or completed suicides.****COMPLIANCE****VERIFICATION**

|  |  |  |
|--|--|--|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review | <input checked="" type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input type="checkbox"/> Sample of facility records reviewed           | <input type="checkbox"/> Other (specify):                          |
| <input type="checkbox"/> Non-compliant             | <input type="checkbox"/> Sight confirmation by inspector               |  |
| <input type="checkbox"/> Not reviewed              | <input type="checkbox"/> Verbal confirmation by facility staff         |  |

Comments:

**DOC 350.17 (10) Documentation of actions and decisions regarding inmates who are suicide risks, including all of the following:**

- (a) Individual initiating the suicide watch.
- (b) Date and time watch was initiated.
- (c) Reason watch was initiated.
- (d) Name of supervisor contacted.
- (e) Date and time supervisor contacted.
- (f) Name, date, and time of referral to mental health professional.
- (g) Written documentation from the mental health professional removing an inmate from a suicide watch including name, date and time.
  - Supervisory review of the relevant documentation is completed.

**COMPLIANCE**

**VERIFICATION**

|   |   |   |
|---|---|---|
| <input checked="" type="checkbox"/> Meets standard    | <input checked="" type="checkbox"/> Policy and procedure manual review    | <input type="checkbox"/> Previous compliance documented |
| <input checked="" type="checkbox"/> Needs improvement | <input checked="" type="checkbox"/> Sample of facility records reviewed   | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/> Non-compliant                | <input type="checkbox"/> Sight confirmation by inspector                  |   |
| <input type="checkbox"/> Not reviewed                 | <input checked="" type="checkbox"/> Verbal confirmation by facility staff |   |

Comments: A spot check of records verified general compliance; however, there were inconsistencies with the completion of this section within the jail management system (it should be noted administration sent a follow-up email to all staff).

**DOC 350.17 (11) Implementation of 2 hours of annual documented staff training regarding suicide prevention and identification of risk factors.**

**COMPLIANCE**

**VERIFICATION**

|  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review    | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input checked="" type="checkbox"/> Sample of facility records reviewed   | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/> Non-compliant             | <input type="checkbox"/> Sight confirmation by inspector                  |   |
| <input type="checkbox"/> Not reviewed              | <input checked="" type="checkbox"/> Verbal confirmation by facility staff |   |

Comments: A spot check of training records verified compliance.

**DOC 350.17 (12) Access by staff to debriefing and support services.**

**COMPLIANCE**

**VERIFICATION**

|  |  |  |
|--|--|--|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review | <input checked="" type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input type="checkbox"/> Sample of facility records reviewed           | <input type="checkbox"/> Other (specify):                          |
| <input type="checkbox"/> Non-compliant             | <input type="checkbox"/> Sight confirmation by inspector               |  |
| <input type="checkbox"/> Not reviewed              | <input type="checkbox"/> Verbal confirmation by facility staff         |  |

Comments:

**DOC 350.17 (13) Implementation of an operational review following a suicide or significant suicide attempt.**

**COMPLIANCE**

**VERIFICATION**

|  |  |  |
|--|--|--|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review | <input checked="" type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input type="checkbox"/> Sample of facility records reviewed           | <input type="checkbox"/> Other (specify):                          |
| <input type="checkbox"/> Non-compliant             | <input type="checkbox"/> Sight confirmation by inspector               |  |
| <input type="checkbox"/> Not reviewed              | <input type="checkbox"/> Verbal confirmation by facility staff         |  |

Comments:

**DOC 350.25 Administrative confinement.** In this section, "administrative confinement" means a non-punitive, segregated confinement of an inmate in his or her cell or other designated area to ensure personal safety and security within the jail. The jail shall have policies and procedures outlining the administrative confinement process.

**DOC 350.25 (1)** An inmate may be placed in administrative confinement if the inmate's continued presence in the general population meets one of the following:

- (a) Presents a substantial risk of physical harm to the inmate, another person or property.
- (b) Threatens the security and order of the jail.
- (c) Inhibits a pending disciplinary investigation.

COMPLIANCE

VERIFICATION

|                                     |                   |                                     |                                       |                          |                                |
|-------------------------------------|-------------------|-------------------------------------|---------------------------------------|--------------------------|--------------------------------|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> | Policy and procedure manual review    | <input type="checkbox"/> | Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input checked="" type="checkbox"/> | Sample of facility records reviewed   | <input type="checkbox"/> | Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input type="checkbox"/>            | Sight confirmation by inspector       |                          |                                |
| <input type="checkbox"/>            | Not reviewed      | <input checked="" type="checkbox"/> | Verbal confirmation by facility staff |                          |                                |

Comments: Policy #602.04 addresses administrative confinement placements. A spot check of records verified compliance.

**DOC 350.25 (2)** A jail staff member shall inform his or her supervisor of any incident that may require administrative confinement of an inmate and the supervisor shall determine whether to place the inmate in administrative confinement. In the absence of his or her supervisor, a jail staff member may place an inmate in administrative confinement. The staff member's supervisor shall review that placement decision within 24 hours. This review shall include evaluation of inmate's classification.

COMPLIANCE

VERIFICATION

|                                     |                   |                                     |                                       |                          |                                |
|-------------------------------------|-------------------|-------------------------------------|---------------------------------------|--------------------------|--------------------------------|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> | Policy and procedure manual review    | <input type="checkbox"/> | Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input type="checkbox"/>            | Sample of facility records reviewed   | <input type="checkbox"/> | Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input type="checkbox"/>            | Sight confirmation by inspector       |                          |                                |
| <input type="checkbox"/>            | Not reviewed      | <input type="checkbox"/>            | Verbal confirmation by facility staff |                          |                                |

Comments:

**DOC 350.25 (3)** An inmate's progress in administrative confinement shall be reviewed by a supervisor at least once every seven days. The supervisor shall determine when the inmate no longer presents a threat to the safety, security and order of the jail and may be released to the general population. Each review shall be documented.

COMPLIANCE

VERIFICATION

|                                     |                   |                                     |                                       |                          |                                |
|-------------------------------------|-------------------|-------------------------------------|---------------------------------------|--------------------------|--------------------------------|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> | Policy and procedure manual review    | <input type="checkbox"/> | Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input checked="" type="checkbox"/> | Sample of facility records reviewed   | <input type="checkbox"/> | Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input checked="" type="checkbox"/> | Sight confirmation by inspector       |                          |                                |
| <input type="checkbox"/>            | Not reviewed      | <input checked="" type="checkbox"/> | Verbal confirmation by facility staff |                          |                                |

Comments: A weekly restrictive housing meeting was observed during the inspection (to include deputies, supervisors, classification, medical, and mental health staff).

**DOC 350.25 (4)** The reason an inmate is placed in administrative confinement and the length of time the inmate remains in administrative confinement shall be documented in the inmate's file.

- The inmate is informed of the reasons and conditions of the inmate's Administrative Confinement.

COMPLIANCE

VERIFICATION

|                                     |                   |                                     |                                       |                          |                                |
|-------------------------------------|-------------------|-------------------------------------|---------------------------------------|--------------------------|--------------------------------|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> | Policy and procedure manual review    | <input type="checkbox"/> | Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input type="checkbox"/>            | Sample of facility records reviewed   | <input type="checkbox"/> | Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input type="checkbox"/>            | Sight confirmation by inspector       |                          |                                |
| <input type="checkbox"/>            | Not reviewed      | <input type="checkbox"/>            | Verbal confirmation by facility staff |                          |                                |

Comments:

## RECORDS AND REPORTING

### DOC 350.10 Records and reporting.

**DOC 350.10 (1) Register of inmates.** Each jail shall keep a register of all inmates. The register shall contain identifying information on each inmate, including name, residence, age, sex, race, court order, time and cause of placement and placing authority, and time of release and releasing authority. If an inmate escapes, the time and manner of the escape shall be recorded in the register.

#### COMPLIANCE

#### VERIFICATION

|  |  |  |
|--|--|--|
| <input checked="" type="checkbox"/> Meets standard | <input type="checkbox"/> Policy and procedure manual review    | <input checked="" type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input type="checkbox"/> Sample of facility records reviewed   | <input type="checkbox"/> Other (specify):                          |
| <input type="checkbox"/> Non-compliant             | <input type="checkbox"/> Sight confirmation by inspector       |  |
| <input type="checkbox"/> Not reviewed              | <input type="checkbox"/> Verbal confirmation by facility staff |  |

Comments:

**DOC 350.10 (2) Storage of records.** Records shall be kept in a secure area. Juvenile records shall be kept separate from adult records and shall be maintained in a confidential manner in accordance with s. 938.396, Stats., and any other applicable federal or state law.

#### COMPLIANCE

#### VERIFICATION

|  |  |   |
|--|--|---|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input type="checkbox"/> Sample of facility records reviewed           | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/> Non-compliant             | <input type="checkbox"/> Sight confirmation by inspector               |   |
| <input type="checkbox"/> Not reviewed              | <input type="checkbox"/> Verbal confirmation by facility staff         |   |

Comments:

## MAINTENANCE OF JAIL, SANITATION AND CARE OF PRISONERS

### Wisconsin State Statute 302.37 Maintenance of jail and care of prisoners.

**Wisconsin State Statute 302.37 (1) (a)** The sheriff or other keeper of a jail shall constantly keep it clean and in a healthful condition and pay strict attention to the personal cleanliness of the prisoners and shall cause the clothing of each prisoner to be properly laundered. The sheriff or keeper shall furnish each prisoner with clean water, towels and bedding. The sheriff or keeper shall serve each prisoner 3 times daily with enough well-cooked, wholesome food. The county board shall prescribe an adequate diet for the prisoners in the county jail.

**Wisconsin State Statute 302.37(3)(a)** The county or municipality shall furnish its jail with necessary bedding, clothing, toilet facilities, light and heat for prisoners

**Wisconsin State Statute 302.37 (4)** The sheriff or other keeper of a jail may use without compensation the labor of any prisoner sentenced to actual confinement in the county jail or, with the prisoner's consent, any other prisoner in the maintaining of and the housekeeping of the jail, including the property on which it stands. Any prisoner who escapes while working on the grounds outside the jail enclosure shall be punished as provided in s. 946.42.

- A daily inspection is conducted by jail staff of housekeeping, sanitation, and physical plant maintenance.
- The jail is constantly clean and in a healthful condition.
- Inmate areas are free of graffiti, posters, wall coverings, etching, etc.
- All surfaces, equipment, and facilities are clean and in good repair.
- Air handling systems, including ventilation screens and covers, are clean, unobstructed, and in good working order.
- Inmate personal property allowed in the housing units is subject to limitations on volume and content.
- Inmates are held accountable for making the beds, cleaning the floors, cleaning the common bathroom facilities, properly storing property, and maintaining cleanliness and order in the housing units daily.
- Inmates and staff are held accountable for housekeeping and sanitation deficiencies.
- Identified maintenance needs are addressed in a timely manner.
- Hallways are free of clutter and obstructions.

| COMPLIANCE                          |                   | VERIFICATION                        |                                       |
|-------------------------------------|-------------------|-------------------------------------|---------------------------------------|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> | Policy and procedure manual review    |
| <input checked="" type="checkbox"/> | Needs improvement | <input checked="" type="checkbox"/> | Sample of facility records reviewed   |
| <input type="checkbox"/>            | Non-compliant     | <input checked="" type="checkbox"/> | Sight confirmation by inspector       |
| <input type="checkbox"/>            | Not reviewed      | <input checked="" type="checkbox"/> | Verbal confirmation by facility staff |

Comments: See inspection cover letter for more details.

**DOC 350.12 Sanitation and Hygiene. The jail shall have policies and procedures relating to sanitation and hygiene.**

**DOC 350.12 (1) Facilities are required to be clean and in good repair.**

| COMPLIANCE                          |                   | VERIFICATION                        |                                       |
|-------------------------------------|-------------------|-------------------------------------|---------------------------------------|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> | Policy and procedure manual review    |
| <input checked="" type="checkbox"/> | Needs improvement | <input checked="" type="checkbox"/> | Sample of facility records reviewed   |
| <input type="checkbox"/>            | Non-compliant     | <input checked="" type="checkbox"/> | Sight confirmation by inspector       |
| <input type="checkbox"/>            | Not reviewed      | <input checked="" type="checkbox"/> | Verbal confirmation by facility staff |

Comments: Policy series #608 addresses sanitation and hygiene (see cover letter for areas of concern).

**DOC 350.12 (2 ) Blankets shall be laundered monthly and before reissue.**

**DOC 350.12 (3) Sheets, pillowcases and mattress covers shall be changed and washed at least weekly and before reissue.**

**DOC 350.12 (4) Clean towels shall be issued to each inmate twice a week.**

| COMPLIANCE                          |                   | VERIFICATION                        |                                       |
|-------------------------------------|-------------------|-------------------------------------|---------------------------------------|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> | Policy and procedure manual review    |
| <input type="checkbox"/>            | Needs improvement | <input type="checkbox"/>            | Sample of facility records reviewed   |
| <input type="checkbox"/>            | Non-compliant     | <input type="checkbox"/>            | Sight confirmation by inspector       |
| <input type="checkbox"/>            | Not reviewed      | <input checked="" type="checkbox"/> | Verbal confirmation by facility staff |

Comments: Inmates and staff reported blankets are laundered once a month, bedding is once a week, and towels twice a week.

**DOC 350.12 (5) Mattresses shall be provided where there is a need for overnight detention. Each mattress and each pillow, if used, shall be covered with a fire retardant, waterproof, easy-to-sanitize material. Mattresses and pillows shall be kept in good repair and in a clean and sanitary condition. The sheriff shall provide adequate bedding. Mattresses shall be cleaned and sanitized before reissue.**

**DOC 350.12 (6) Suppliers of mattresses and pillows shall be provide evidence to the sheriff that the products are fire retardant, waterproof, and easy to clean.**

**DOC 350.12 (7) Mattresses shall be of proper size to fit the bed.**

| COMPLIANCE                          |                   | VERIFICATION                        |                                       |
|-------------------------------------|-------------------|-------------------------------------|---------------------------------------|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> | Policy and procedure manual review    |
| <input type="checkbox"/>            | Needs improvement | <input type="checkbox"/>            | Sample of facility records reviewed   |
| <input type="checkbox"/>            | Non-compliant     | <input checked="" type="checkbox"/> | Sight confirmation by inspector       |
| <input type="checkbox"/>            | Not reviewed      | <input type="checkbox"/>            | Verbal confirmation by facility staff |

Comments: A spot check of mattresses verified compliance.

**DOC 350.12 (8) The sheriff shall provide an inmate whose clothing has been confiscated with adequate and appropriate clothing, including footwear, for use while the inmate is in custody. Footwear shall be cleaned and sanitized before reissue.**

COMPLIANCE

VERIFICATION

|                                     |                   |                                     |                                       |                                     |                                |
|-------------------------------------|-------------------|-------------------------------------|---------------------------------------|-------------------------------------|--------------------------------|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> | Policy and procedure manual review    | <input type="checkbox"/>            | Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input type="checkbox"/>            | Sample of facility records reviewed   | <input checked="" type="checkbox"/> | Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input checked="" type="checkbox"/> | Sight confirmation by inspector       |                                     |                                |
| <input type="checkbox"/>            | Not reviewed      | <input checked="" type="checkbox"/> | Verbal confirmation by facility staff |                                     |                                |

Comments: **Necessary clothing is provided at intake.**

**DOC 350.12 (9) Laundry schedule shall be established to meet daily needs. All issued and allowed clothing items are laundered twice weekly.**

COMPLIANCE

VERIFICATION

|                                     |                   |                                     |                                       |                                     |                                |
|-------------------------------------|-------------------|-------------------------------------|---------------------------------------|-------------------------------------|--------------------------------|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> | Policy and procedure manual review    | <input type="checkbox"/>            | Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input type="checkbox"/>            | Sample of facility records reviewed   | <input checked="" type="checkbox"/> | Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input type="checkbox"/>            | Sight confirmation by inspector       |                                     |                                |
| <input type="checkbox"/>            | Not reviewed      | <input checked="" type="checkbox"/> | Verbal confirmation by facility staff |                                     |                                |

Comments: **Staff and inmates reported clothing is getting laundered twice a week.**

**DOC 350.12 (10) Vermin and pests are controlled with an effective, documented program. Containers of poisonous compounds used for exterminating rodents or insects shall be prominently and distinctly labeled for easy identification of contents. Poisonous compounds shall be stored independently and separately from food and kitchenware in a locked area not accessible to inmates.**

COMPLIANCE

VERIFICATION

|                                     |                   |                                     |                                       |                          |                                |
|-------------------------------------|-------------------|-------------------------------------|---------------------------------------|--------------------------|--------------------------------|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> | Policy and procedure manual review    | <input type="checkbox"/> | Previous compliance documented |
| <input checked="" type="checkbox"/> | Needs improvement | <input checked="" type="checkbox"/> | Sample of facility records reviewed   | <input type="checkbox"/> | Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input checked="" type="checkbox"/> | Sight confirmation by inspector       |                          |                                |
| <input type="checkbox"/>            | Not reviewed      | <input checked="" type="checkbox"/> | Verbal confirmation by facility staff |                          |                                |

Comments: **Small flies were observed in two inmate showers (611 & 3G). It was reported the facility has a contract with Wil-Kil for routine pest control services (documentation of monthly service records was observed).**

**DOC 350.12 (11) After 24 hours, inmates shall be provided with towels and toilet articles sufficient for the maintenance of cleanliness and hygiene, including toothpaste and toothbrush, soap and comb. Basic feminine hygiene materials for females and toilet paper shall be provided to inmates upon request. There shall be no common use of toothbrushes, combs, shaving materials or feminine hygiene materials.**

COMPLIANCE

VERIFICATION

|                                     |                   |                                     |                                       |                                     |                                |
|-------------------------------------|-------------------|-------------------------------------|---------------------------------------|-------------------------------------|--------------------------------|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> | Policy and procedure manual review    | <input type="checkbox"/>            | Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input type="checkbox"/>            | Sample of facility records reviewed   | <input checked="" type="checkbox"/> | Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input checked="" type="checkbox"/> | Sight confirmation by inspector       |                                     |                                |
| <input type="checkbox"/>            | Not reviewed      | <input checked="" type="checkbox"/> | Verbal confirmation by facility staff |                                     |                                |

Comments:

**DOC 350.12 (12) Inmates are provided cleaning materials daily. Tables used for common use and meals shall be kept sanitized. Door traps used for passing meals or other items shall be kept sanitized.**

COMPLIANCE

VERIFICATION

|                                     |                   |                                     |                                       |                                     |                                |
|-------------------------------------|-------------------|-------------------------------------|---------------------------------------|-------------------------------------|--------------------------------|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> | Policy and procedure manual review    | <input type="checkbox"/>            | Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input type="checkbox"/>            | Sample of facility records reviewed   | <input checked="" type="checkbox"/> | Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input checked="" type="checkbox"/> | Sight confirmation by inspector       |                                     |                                |
| <input type="checkbox"/>            | Not reviewed      | <input checked="" type="checkbox"/> | Verbal confirmation by facility staff |                                     |                                |

Comments: **Inmates reported having access to cleaning supplies on a daily basis.**



**DOC 350.12 (13) Safety and sanitation inspections of the jail are completed and documented at a minimum of once monthly.**

COMPLIANCE

VERIFICATION

|                                     |                   |                                     |                                       |                          |                                |
|-------------------------------------|-------------------|-------------------------------------|---------------------------------------|--------------------------|--------------------------------|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> | Policy and procedure manual review    | <input type="checkbox"/> | Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input checked="" type="checkbox"/> | Sample of facility records reviewed   | <input type="checkbox"/> | Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input type="checkbox"/>            | Sight confirmation by inspector       |                          |                                |
| <input type="checkbox"/>            | Not reviewed      | <input checked="" type="checkbox"/> | Verbal confirmation by facility staff |                          |                                |

Comments: A spot check of records verified compliance (inspections are completed jointly between a Sergeant and medical staff).

**DOC 350.12 (14) Common use grooming tools are disinfected and cleaned before reissue and are stored in a secure area.**

COMPLIANCE

VERIFICATION

|                                     |                   |                                     |                                       |                          |                                |
|-------------------------------------|-------------------|-------------------------------------|---------------------------------------|--------------------------|--------------------------------|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> | Policy and procedure manual review    | <input type="checkbox"/> | Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input type="checkbox"/>            | Sample of facility records reviewed   | <input type="checkbox"/> | Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input type="checkbox"/>            | Sight confirmation by inspector       |                          |                                |
| <input type="checkbox"/>            | Not reviewed      | <input checked="" type="checkbox"/> | Verbal confirmation by facility staff |                          |                                |

Comments:

**DOC 350.12 (15) Property storage containers shall be sanitized before reuse.**

- Property storage containers may include bags, bins, totes and lockers.

COMPLIANCE

VERIFICATION

|                                     |                   |                                     |                                       |                          |                                |
|-------------------------------------|-------------------|-------------------------------------|---------------------------------------|--------------------------|--------------------------------|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> | Policy and procedure manual review    | <input type="checkbox"/> | Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input type="checkbox"/>            | Sample of facility records reviewed   | <input type="checkbox"/> | Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input type="checkbox"/>            | Sight confirmation by inspector       |                          |                                |
| <input type="checkbox"/>            | Not reviewed      | <input checked="" type="checkbox"/> | Verbal confirmation by facility staff |                          |                                |

Comments:

**DOC 350.12 (16) Trash is removed daily from all dayrooms.**

COMPLIANCE

VERIFICATION

|                                     |                   |                                     |                                       |                          |                                |
|-------------------------------------|-------------------|-------------------------------------|---------------------------------------|--------------------------|--------------------------------|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> | Policy and procedure manual review    | <input type="checkbox"/> | Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input type="checkbox"/>            | Sample of facility records reviewed   | <input type="checkbox"/> | Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input checked="" type="checkbox"/> | Sight confirmation by inspector       |                          |                                |
| <input type="checkbox"/>            | Not reviewed      | <input type="checkbox"/>            | Verbal confirmation by facility staff |                          |                                |

Comments:

**DOC 350.12 (17) Hazardous waste shall be disposed of according to government regulations.**

COMPLIANCE

VERIFICATION

|                                     |                   |                                     |                                       |                          |                                |
|-------------------------------------|-------------------|-------------------------------------|---------------------------------------|--------------------------|--------------------------------|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> | Policy and procedure manual review    | <input type="checkbox"/> | Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input type="checkbox"/>            | Sample of facility records reviewed   | <input type="checkbox"/> | Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input type="checkbox"/>            | Sight confirmation by inspector       |                          |                                |
| <input type="checkbox"/>            | Not reviewed      | <input type="checkbox"/>            | Verbal confirmation by facility staff |                          |                                |

Comments:



## INMATE SERVICES

**DOC 350.26 Grievance Process.** The jail shall have policies and procedures relating to an inmate grievance process and ensure it is available to all inmates and includes at least one level of appeal.

| COMPLIANCE                          |                   | VERIFICATION  |   |
|-------------------------------------|-------------------|---|---|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> Policy and procedure manual review    | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input type="checkbox"/> Sample of facility records reviewed              | <input checked="" type="checkbox"/> Other (specify):    |
| <input type="checkbox"/>            | Non-compliant     | <input type="checkbox"/> Sight confirmation by inspector                  |   |
| <input type="checkbox"/>            | Not reviewed      | <input checked="" type="checkbox"/> Verbal confirmation by facility staff |   |

Comments: **Policy #607.07 addresses the inmate grievance process.**

**DOC 350.27 Legal Access.** The jail shall have policies and procedures to address inmates' access to the courts, their attorneys, and legal materials.

| COMPLIANCE                          |                   | VERIFICATION  |   |
|-------------------------------------|-------------------|---|---|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> Policy and procedure manual review    | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input type="checkbox"/> Sample of facility records reviewed              | <input checked="" type="checkbox"/> Other (specify):    |
| <input type="checkbox"/>            | Non-compliant     | <input checked="" type="checkbox"/> Sight confirmation by inspector       |   |
| <input type="checkbox"/>            | Not reviewed      | <input checked="" type="checkbox"/> Verbal confirmation by facility staff |   |

Comments: **Policies #614.01, #614.03, #614.06, and #614.07 address legal access.**

**DOC 350.28 Indigence.** The jail shall have policies and procedures to address indigence.

**DOC 350.28 (1)** The jail shall establish definitions and procedures to define indigence.

**DOC 350.28 (2)** Inmates' access to health care, programming and essential services is not precluded by inability to pay.

| COMPLIANCE                          |                   | VERIFICATION  |   |
|-------------------------------------|-------------------|---|---|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> Policy and procedure manual review    | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input type="checkbox"/> Sample of facility records reviewed              | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input type="checkbox"/> Sight confirmation by inspector                  |   |
| <input type="checkbox"/>            | Not reviewed      | <input checked="" type="checkbox"/> Verbal confirmation by facility staff |   |

Comments: **Policy #615.08 addresses inmate indigence.**

**DOC 350.29 Mail.** The jail shall have policies and procedures relating to written contact between inmates and their families, friends, attorneys, the court system, government officials and others.

**DOC 350.29 (1)** Provision for staff inspection and reading of non-privileged incoming and outgoing mail.

- Staff demonstrate a working knowledge of the procedures for mail inspection.

**DOC 350.29 (2)** Provision for the limited inspection of incoming and outgoing privileged mail.

- Staff demonstrate a working knowledge of the definition of privileged mail and the procedures for inspecting it.

| COMPLIANCE                          |                   | VERIFICATION  |   |
|-------------------------------------|-------------------|---|---|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> Policy and procedure manual review    | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input type="checkbox"/> Sample of facility records reviewed              | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input type="checkbox"/> Sight confirmation by inspector                  |   |
| <input type="checkbox"/>            | Not reviewed      | <input checked="" type="checkbox"/> Verbal confirmation by facility staff |   |

Comments: **Policy #614.07 addresses inmate mail.**

**DOC 350.29 (3) Delivery of all non-privileged and approved privileged incoming mail.**

- Inmate mail is delivered to inmates in a timely manner.

COMPLIANCE

VERIFICATION

|  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review    | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input type="checkbox"/> Sample of facility records reviewed              | <input checked="" type="checkbox"/> Other (specify):    |
| <input type="checkbox"/> Non-compliant             | <input type="checkbox"/> Sight confirmation by inspector                  |   |
| <input type="checkbox"/> Not reviewed              | <input checked="" type="checkbox"/> Verbal confirmation by facility staff |   |

Comments:

**DOC 350.29 (4) Inventory and disposition of contraband items found in mail.**

- Contraband items are inventoried and documented.
- Contraband is promptly turned over to supervisory staff.

COMPLIANCE

VERIFICATION

|  |  |   |
|--|--|---|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input type="checkbox"/> Sample of facility records reviewed           | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/> Non-compliant             | <input type="checkbox"/> Sight confirmation by inspector               |   |
| <input type="checkbox"/> Not reviewed              | <input type="checkbox"/> Verbal confirmation by facility staff         |   |

Comments:

**DOC 350.29 (5) Provision of postage to indigent inmates.**

COMPLIANCE

VERIFICATION

|  |  |   |
|--|--|---|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input type="checkbox"/> Sample of facility records reviewed           | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/> Non-compliant             | <input type="checkbox"/> Sight confirmation by inspector               |   |
| <input type="checkbox"/> Not reviewed              | <input type="checkbox"/> Verbal confirmation by facility staff         |   |

Comments:

**DOC 350.29 (6) Provision for notifying inmates when outgoing or incoming mail is withheld.**

- A non-delivery of mail form is completed and provided to the inmate when mail is confiscated, destroyed, or rejected.

COMPLIANCE

VERIFICATION

|  |  |   |
|--|--|---|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input type="checkbox"/> Sample of facility records reviewed           | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/> Non-compliant             | <input type="checkbox"/> Sight confirmation by inspector               |   |
| <input type="checkbox"/> Not reviewed              | <input type="checkbox"/> Verbal confirmation by facility staff         |   |

Comments:

**DOC 350.30 Visitation. The jail shall have policies and procedures relating to visitation.**

**DOC 350.30 (1) Establishment of a visiting schedule for family, friends, attorneys, and others. Attorney visits shall be allowed during reasonable hours, as long as security and daily routine are not unduly interrupted.**

**DOC 350.30 (2) Establishment of procedures for requesting visitation during nonscheduled times.**

- Accommodations are made for visits to occur at times other than scheduled visiting times.

| COMPLIANCE                          |                   | VERIFICATION                        |                                       |                                     |                                |
|-------------------------------------|-------------------|-------------------------------------|---------------------------------------|-------------------------------------|--------------------------------|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> | Policy and procedure manual review    | <input type="checkbox"/>            | Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input checked="" type="checkbox"/> | Sample of facility records reviewed   | <input checked="" type="checkbox"/> | Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input checked="" type="checkbox"/> | Sight confirmation by inspector       |                                     |                                |
| <input type="checkbox"/>            | Not reviewed      | <input checked="" type="checkbox"/> | Verbal confirmation by facility staff |                                     |                                |

Comments: Policies #603.04 and #614.04 - #614.06 address inmate visitation. Visitation procedures are explained in the jail rules. Inmates are generally afforded two 45-minute visits per week. Visits are conducted both electronically and via non-contact booths (the PSB can also accommodate contact visitation).

**DOC 350.30 (3) Documentation of all visits through a visitor log or register.**

- All non-jail staff members who enter the jail are documented on the visitor's log or other appropriate register.

| COMPLIANCE                          |                   | VERIFICATION                        |                                       |                          |                                |
|-------------------------------------|-------------------|-------------------------------------|---------------------------------------|--------------------------|--------------------------------|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> | Policy and procedure manual review    | <input type="checkbox"/> | Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input type="checkbox"/>            | Sample of facility records reviewed   | <input type="checkbox"/> | Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input type="checkbox"/>            | Sight confirmation by inspector       |                          |                                |
| <input type="checkbox"/>            | Not reviewed      | <input type="checkbox"/>            | Verbal confirmation by facility staff |                          |                                |

Comments:

**DOC 350.30 (4) Establishment of a search policy of visitors and their possessions.**

- Personal contact visitors are subject to a search procedure.
- Program workers and volunteers are subject to strict guidelines regarding personal items, carry-in equipment and compliance with jail policies.
- Law enforcement/Community Corrections/ Legal visitors are required to adhere to safe correctional practices limiting carry-in items and may be subject to search.
- Jail staff consistently apply visitation and search standards to all non-jail staff.

| COMPLIANCE                          |                   | VERIFICATION                        |                                       |                          |                                |
|-------------------------------------|-------------------|-------------------------------------|---------------------------------------|--------------------------|--------------------------------|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> | Policy and procedure manual review    | <input type="checkbox"/> | Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input type="checkbox"/>            | Sample of facility records reviewed   | <input type="checkbox"/> | Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input type="checkbox"/>            | Sight confirmation by inspector       |                          |                                |
| <input type="checkbox"/>            | Not reviewed      | <input type="checkbox"/>            | Verbal confirmation by facility staff |                          |                                |

Comments:

**DOC 350.30 (5) Posting of visitation policies and procedures, including visitation schedule, in a place readily accessible to visitors and inmates.**

| COMPLIANCE                          |                   | VERIFICATION                        |                                       |                          |                                |
|-------------------------------------|-------------------|-------------------------------------|---------------------------------------|--------------------------|--------------------------------|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> | Policy and procedure manual review    | <input type="checkbox"/> | Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input type="checkbox"/>            | Sample of facility records reviewed   | <input type="checkbox"/> | Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input checked="" type="checkbox"/> | Sight confirmation by inspector       |                          |                                |
| <input type="checkbox"/>            | Not reviewed      | <input checked="" type="checkbox"/> | Verbal confirmation by facility staff |                          |                                |

Comments: The visitation schedule is posted in the public lobby, housing units, and DCSO website (the visitation process is also explained in the inmate handbook).

**DOC 350.30 (6) Establishment of a search policy for inmates before and after each visit.**

COMPLIANCE

VERIFICATION

|                                     |                   |                                     |                                       |                          |                                |
|-------------------------------------|-------------------|-------------------------------------|---------------------------------------|--------------------------|--------------------------------|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> | Policy and procedure manual review    | <input type="checkbox"/> | Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input type="checkbox"/>            | Sample of facility records reviewed   | <input type="checkbox"/> | Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input type="checkbox"/>            | Sight confirmation by inspector       |                          |                                |
| <input type="checkbox"/>            | Not reviewed      | <input type="checkbox"/>            | Verbal confirmation by facility staff |                          |                                |

Comments:

**DOC 350.31 Programs and services. The jail shall have policies and procedures relating to the provision of inmate programs and services.**

**DOC 350.31 (1) Use of community resources, contract providers, and volunteers authorized by the sheriff.**

**DOC 350.31 (2) Notification to inmates of availability, eligibility, and schedules.**

**DOC 350.31 (3) Conducting criminal background checks on all volunteers, community resources, and contract providers.**

**DOC 350.31 (4) Orientation and training on facility operations for all volunteers.**

**DOC 350.31 (5) Educational programming for inmates who are under 18 years of age consistent with the requirements of the Department of Public Instruction.**

COMPLIANCE

VERIFICATION

|                                     |                   |                                     |                                       |                                     |                                |
|-------------------------------------|-------------------|-------------------------------------|---------------------------------------|-------------------------------------|--------------------------------|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> | Policy and procedure manual review    | <input type="checkbox"/>            | Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input type="checkbox"/>            | Sample of facility records reviewed   | <input checked="" type="checkbox"/> | Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input type="checkbox"/>            | Sight confirmation by inspector       |                                     |                                |
| <input type="checkbox"/>            | Not reviewed      | <input checked="" type="checkbox"/> | Verbal confirmation by facility staff |                                     |                                |

Comments: Policies #608.05, #614.08, #614.11, and series #615 address inmate programs and services.

**DOC 350.32 Religious programming. Inmates shall have the opportunity to participate in practices of their religious faith consistent with existing state and federal statutes. The jail shall have policies and procedures relating to religious programming.**

**DOC 350.32 (1) Identification of religious organizations and clergy willing to conduct religious services in the facility.**

**DOC 350.32 (2) Notification to inmates of the schedule of religious services available in the jail.**

- Staff demonstrate a knowledge of the procedure for assessing and responding to inmate requests for religious services.

COMPLIANCE

VERIFICATION

|                                     |                   |                                     |                                       |                                     |                                |
|-------------------------------------|-------------------|-------------------------------------|---------------------------------------|-------------------------------------|--------------------------------|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> | Policy and procedure manual review    | <input type="checkbox"/>            | Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input checked="" type="checkbox"/> | Sample of facility records reviewed   | <input checked="" type="checkbox"/> | Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input type="checkbox"/>            | Sight confirmation by inspector       |                                     |                                |
| <input type="checkbox"/>            | Not reviewed      | <input checked="" type="checkbox"/> | Verbal confirmation by facility staff |                                     |                                |

Comments: Policies #603.03, #614.06, #614.08, #614.11, and #615.04 address religious programming. Religious services and Bible studies are held throughout the week (inmates are notified of the schedule via the in-house television and housing unit postings). The jail chaplains are available Monday - Friday and are on-call for counseling emergencies. Specific denominational services, as well as individual consultations can also be facilitated.

**DOC 350.32 (3) Identification of religious items that may be kept on an inmate's person or in the cell.**

- If religious items are permitted, the policies are consistently applied throughout the jail.

| COMPLIANCE                          |                   | VERIFICATION   |   |
|-------------------------------------|-------------------|--|---|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> Policy and procedure manual review | <input type="checkbox"/> Previous compliance documented |
| <input checked="" type="checkbox"/> | Needs improvement | <input type="checkbox"/> Sample of facility records reviewed           | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input type="checkbox"/> Sight confirmation by inspector               |   |
| <input type="checkbox"/>            | Not reviewed      | <input type="checkbox"/> Verbal confirmation by facility staff         |   |

Comments: Policy language is limited to religious texts only (per policy, inmates are allowed to retain possession of a Bible, Koran, or other religious text given by the clergy person).

**DOC 350.32 (4) Conducting criminal background checks on members of a religious organization and clergy.**

| COMPLIANCE                          |                   | VERIFICATION   |   |
|-------------------------------------|-------------------|--|---|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> Policy and procedure manual review | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input type="checkbox"/> Sample of facility records reviewed           | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input type="checkbox"/> Sight confirmation by inspector               |   |
| <input type="checkbox"/>            | Not reviewed      | <input type="checkbox"/> Verbal confirmation by facility staff         |   |

Comments:

**DOC 350.32 (5) Orientation and training on facility operations for all volunteers.**

- Documentation of the orientation and volunteer agreement is on file.

| COMPLIANCE                          |                   | VERIFICATION   |   |
|-------------------------------------|-------------------|--|---|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> Policy and procedure manual review | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input type="checkbox"/> Sample of facility records reviewed           | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input type="checkbox"/> Sight confirmation by inspector               |   |
| <input type="checkbox"/>            | Not reviewed      | <input type="checkbox"/> Verbal confirmation by facility staff         |   |

Comments:

**DOC 350.33 Recreation. The jail shall have policies and procedures relating to recreation.**

**DOC 350.33 (1) Identification of the recreational activities that are available.**

**DOC 350.33 (2) Schedule of recreational activities.**

| COMPLIANCE                          |                   | VERIFICATION  |   |
|-------------------------------------|-------------------|---|---|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> Policy and procedure manual review    | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input type="checkbox"/> Sample of facility records reviewed              | <input checked="" type="checkbox"/> Other (specify):    |
| <input type="checkbox"/>            | Non-compliant     | <input checked="" type="checkbox"/> Sight confirmation by inspector       |   |
| <input type="checkbox"/>            | Not reviewed      | <input checked="" type="checkbox"/> Verbal confirmation by facility staff |   |

Comments: Policy #615.01 addresses inmate recreation. Both buildings have indoor/outdoor recreational opportunities (although this can be influenced by the weather and amount of interest). Inmates in the CCB reported monthly access to recreation while inmates in the PSB reported weekly recreation.

**DOC 350.33 (3) When and where available, at least one hour of daily exercise and recreation is outside the cell or outdoors.**

| COMPLIANCE                          |                   | VERIFICATION  |   |
|-------------------------------------|-------------------|---|---|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> Policy and procedure manual review    | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input checked="" type="checkbox"/> Sample of facility records reviewed   | <input checked="" type="checkbox"/> Other (specify):    |
| <input type="checkbox"/>            | Non-compliant     | <input checked="" type="checkbox"/> Sight confirmation by inspector       |   |
| <input type="checkbox"/>            | Not reviewed      | <input checked="" type="checkbox"/> Verbal confirmation by facility staff |   |

Comments:

**DOC 350.34 Publications.** The jail shall have policies and procedures relating to access to publications.

**DOC 350.34 (1) Provision of publications of general interest for inmates such as books, newspapers and magazines.**

**DOC 350.34 (2) Identification of publications that are prohibited for inmates because their content creates a security risk.**

- Reading material restrictions are posted or otherwise accessible to inmates.

**DOC 350.34 (3) Inspection of publications brought by visitors for inmates if the jail allows visitors to bring in reading materials.**

- There are limitations on the volume of personal reading materials that can be kept in the housing area, and these limitations are enforced consistently throughout the jail.
- All reading materials allowed to be brought in by visitors are subject to search.

COMPLIANCE

VERIFICATION

|                                     |                   |                                     |                                       |                                     |                                |
|-------------------------------------|-------------------|-------------------------------------|---------------------------------------|-------------------------------------|--------------------------------|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> | Policy and procedure manual review    | <input type="checkbox"/>            | Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input type="checkbox"/>            | Sample of facility records reviewed   | <input checked="" type="checkbox"/> | Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input checked="" type="checkbox"/> | Sight confirmation by inspector       |                                     |                                |
| <input type="checkbox"/>            | Not reviewed      | <input checked="" type="checkbox"/> | Verbal confirmation by facility staff |                                     |                                |

Comments: Policies #614.07, #614.09, #614.10, and #615.06 address publications. Inmates are afforded regular access to reading materials.

**DOC 350.35 Canteen.** The jail shall have policies and procedures for the establishment and use of canteen, vending or other similar services for inmates.

**DOC 350.35 (1) Canteen shall be made available to eligible inmates.**

**DOC 350.35 (2) Access to canteen may be restricted by the facility based upon inmate classification or status.**

COMPLIANCE

VERIFICATION

|                                     |                   |                                     |                                       |                                     |                                |
|-------------------------------------|-------------------|-------------------------------------|---------------------------------------|-------------------------------------|--------------------------------|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> | Policy and procedure manual review    | <input type="checkbox"/>            | Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input type="checkbox"/>            | Sample of facility records reviewed   | <input checked="" type="checkbox"/> | Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input checked="" type="checkbox"/> | Sight confirmation by inspector       |                                     |                                |
| <input type="checkbox"/>            | Not reviewed      | <input checked="" type="checkbox"/> | Verbal confirmation by facility staff |                                     |                                |

Comments: Policy #615.02 addresses inmate commissary. Canteen is provided by CBM Managed Services and inmates are generally allowed to order weekly.

## FOOD SERVICE

**DOC 350.11 Food Service.** The jail shall have policies and procedures relating to food service.

**DOC 350.11 (1) The jail shall provide nutritious and quality food for all inmates.**

**DOC 350.11 (2) An annual menu review by a qualified nutritionist or dietician shall be completed and maintained in the facility files.**

COMPLIANCE

VERIFICATION

|                                     |                   |                                     |                                       |                                     |                                |
|-------------------------------------|-------------------|-------------------------------------|---------------------------------------|-------------------------------------|--------------------------------|
| <input checked="" type="checkbox"/> | Meets standard    | <input checked="" type="checkbox"/> | Policy and procedure manual review    | <input type="checkbox"/>            | Previous compliance documented |
| <input type="checkbox"/>            | Needs improvement | <input checked="" type="checkbox"/> | Sample of facility records reviewed   | <input checked="" type="checkbox"/> | Other (specify):               |
| <input type="checkbox"/>            | Non-compliant     | <input checked="" type="checkbox"/> | Sight confirmation by inspector       |                                     |                                |
| <input type="checkbox"/>            | Not reviewed      | <input checked="" type="checkbox"/> | Verbal confirmation by facility staff |                                     |                                |

Comments: Policy #608.01 and series #609 addresses inmate food service. Consolidated Food Services (Badger Prairie) prepares and delivers inmate meals to the Dane County Jail. Breakfast is prepared onsite, while lunch and dinner are brought over in carts. Once the food is at the jail, inmate workers prepare the food trays. Both buildings have service kitchens which are used to receive food carts and distribute meals to the housing units.

I received a copy of the food service menu which is cycled through monthly. A letter from a Registered Dietician verified that food content and nutritional needs are appropriate. It was reported that the average daily caloric intake ranges between 2550 - 2700.

**DOC 350.11 (3) An annual inspection of all full-production and service kitchens in a jail by a qualified, independent outside source documenting that the food service area meets health and safety codes.**

COMPLIANCE

VERIFICATION

|  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review  | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input checked="" type="checkbox"/> Sample of facility records reviewed | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/> Non-compliant             | <input type="checkbox"/> Sight confirmation by inspector                |   |
| <input type="checkbox"/> Not reviewed              | <input type="checkbox"/> Verbal confirmation by facility staff          |   |

Comments: **An inspection was completed by Public Health of Madison & Dane County on 6/15/17.**

**DOC 350.11 (4) Internal monthly inspection of the food service area is completed and documented.**

COMPLIANCE

VERIFICATION

|  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review    | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input checked="" type="checkbox"/> Sample of facility records reviewed   | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/> Non-compliant             | <input type="checkbox"/> Sight confirmation by inspector                  |   |
| <input type="checkbox"/> Not reviewed              | <input checked="" type="checkbox"/> Verbal confirmation by facility staff |   |

Comments: **A spot check of records verified compliance.**

**DOC 350.11 (5) The kitchen area and all equipment are maintained in a sanitary condition. Routine inspections are completed and documented.**

COMPLIANCE

VERIFICATION

|  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review    | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input checked="" type="checkbox"/> Sample of facility records reviewed   | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/> Non-compliant             | <input checked="" type="checkbox"/> Sight confirmation by inspector       |   |
| <input type="checkbox"/> Not reviewed              | <input checked="" type="checkbox"/> Verbal confirmation by facility staff |   |

Comments:

**DOC 350.11 (6) Three nutritious meals are provided daily, two of which are hot. Variations may be allowed based on weekend and holiday food service demands, provided basic nutritional goals are met.**

COMPLIANCE

VERIFICATION

|  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review    | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input checked="" type="checkbox"/> Sample of facility records reviewed   | <input checked="" type="checkbox"/> Other (specify):    |
| <input type="checkbox"/> Non-compliant             | <input checked="" type="checkbox"/> Sight confirmation by inspector       |   |
| <input type="checkbox"/> Not reviewed              | <input checked="" type="checkbox"/> Verbal confirmation by facility staff |   |

Comments:

**DOC 350.11 (7) Food temperatures are properly maintained.**

- Documentation of daily food preparation temperatures is maintained.
- Documentation of periodic serving temperature readings is maintained.

COMPLIANCE

VERIFICATION

|  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review    | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input checked="" type="checkbox"/> Sample of facility records reviewed   | <input checked="" type="checkbox"/> Other (specify):    |
| <input type="checkbox"/> Non-compliant             | <input type="checkbox"/> Sight confirmation by inspector                  |   |
| <input type="checkbox"/> Not reviewed              | <input checked="" type="checkbox"/> Verbal confirmation by facility staff |   |

Comments: **Documentation of daily food temperatures was observed.**



**DOC 350.11 (8) Food items are stored appropriately at least 6 inches off the floor. Opened food packages are stored in airtight containers that are labeled and dated. Food items are stored in appropriate locations and temperatures.**

- Documentation of daily cooler and freezer temperatures is maintained.

COMPLIANCE

VERIFICATION

|   |  |   |
|---|--|---|
| <input type="checkbox"/> Meets standard           | <input checked="" type="checkbox"/> Policy and procedure manual review | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement        | <input type="checkbox"/> Sample of facility records reviewed           | <input type="checkbox"/> Other (specify):               |
| <input checked="" type="checkbox"/> Non-compliant | <input checked="" type="checkbox"/> Sight confirmation by inspector    |   |
| <input type="checkbox"/> Not reviewed             | <input type="checkbox"/> Verbal confirmation by facility staff         |   |

Comments: Milk cartons were observed on the floor of the CCB cooler.

**DOC 350.11 (9) Special diets are provided as prescribed by a qualified health care professional.**

- Documentation of special diet orders is maintained.

COMPLIANCE

VERIFICATION

|  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review    | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input checked="" type="checkbox"/> Sample of facility records reviewed   | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/> Non-compliant             | <input type="checkbox"/> Sight confirmation by inspector                  |   |
| <input type="checkbox"/> Not reviewed              | <input checked="" type="checkbox"/> Verbal confirmation by facility staff |   |

Comments: Alleged food allergies and medical diets are reviewed by the health authority (special diet sheets were observed).

**DOC 350.11 (10) An inmate may abstain from any foods that violate the inmate's religion. Consistent with available resources, the jail shall provide a substitute from other available foods from the menu served at the meal. The substitutions shall be consistent with sub. (1).**

COMPLIANCE

VERIFICATION

|  |  |   |
|--|--|---|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input type="checkbox"/> Sample of facility records reviewed           | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/> Non-compliant             | <input type="checkbox"/> Sight confirmation by inspector               |   |
| <input type="checkbox"/> Not reviewed              | <input type="checkbox"/> Verbal confirmation by facility staff         |   |

Comments:

**DOC 350.11 (11) Inmates assigned to the kitchen who prepare or serve food shall bathe or shower daily and be provided a clean uniform.**

**DOC 350.11 (12) No person who is known to be infected with any illnesses transmittable by food or utensils may be employed or work as a food handler in a facility.**

**DOC 350.11 (13) All persons who work in food service areas shall wear clean garments and clean caps or hairnets and shall keep their hands clean at all times when engaged in the handling of food, drink, utensils or equipment. Particular attention shall be given to the cleaning of the fingernails.**

COMPLIANCE

VERIFICATION

|  |  |   |
|--|--|---|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input type="checkbox"/> Sample of facility records reviewed           | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/> Non-compliant             | <input checked="" type="checkbox"/> Sight confirmation by inspector    |   |
| <input type="checkbox"/> Not reviewed              | <input type="checkbox"/> Verbal confirmation by facility staff         |   |

Comments: Inmate workers were observed wearing hair nets and gloves.



**DOC 350.11 (14) Inmate workers are provided orientation and training prior to assignment in the kitchen area.**

- Documentation of orientation and training is maintained.

COMPLIANCE

VERIFICATION

|  |  |   |
|--|--|---|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input type="checkbox"/> Sample of facility records reviewed           | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/> Non-compliant             | <input type="checkbox"/> Sight confirmation by inspector               |   |
| <input type="checkbox"/> Not reviewed              | <input type="checkbox"/> Verbal confirmation by facility staff         |   |

Comments:

**DOC 350.11 (15) Inmate workers are supervised throughout all aspects of food preparation and service.**

COMPLIANCE

VERIFICATION

|   |   |   |
|---|---|---|
| <input type="checkbox"/> Meets standard           | <input checked="" type="checkbox"/> Policy and procedure manual review    | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement        | <input type="checkbox"/> Sample of facility records reviewed              | <input type="checkbox"/> Other (specify):               |
| <input checked="" type="checkbox"/> Non-compliant | <input checked="" type="checkbox"/> Sight confirmation by inspector       |   |
| <input type="checkbox"/> Not reviewed             | <input checked="" type="checkbox"/> Verbal confirmation by facility staff |   |

Comments: Jail policy should be updated to reflect all of this standard.

**DOC 350.11 (16) Food and drink shall be protected from contamination. Meals are covered during transit to and within the facility.**

COMPLIANCE

VERIFICATION

|  |  |   |
|--|--|---|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input type="checkbox"/> Sample of facility records reviewed           | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/> Non-compliant             | <input checked="" type="checkbox"/> Sight confirmation by inspector    |   |
| <input type="checkbox"/> Not reviewed              | <input type="checkbox"/> Verbal confirmation by facility staff         |   |

Comments:

**DOC 350.11 (17) Kitchen food storage and dishwashing equipment temperatures are routinely monitored and documented.**

COMPLIANCE

VERIFICATION

|  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review    | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input checked="" type="checkbox"/> Sample of facility records reviewed   | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/> Non-compliant             | <input type="checkbox"/> Sight confirmation by inspector                  |   |
| <input type="checkbox"/> Not reviewed              | <input checked="" type="checkbox"/> Verbal confirmation by facility staff |   |

Comments: Documentation of daily temperatures was observed.

**DOC 350.11 (18) Garbage containers are covered, emptied daily, and are kept clean.**

COMPLIANCE

VERIFICATION

|  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review    | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input type="checkbox"/> Sample of facility records reviewed              | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/> Non-compliant             | <input checked="" type="checkbox"/> Sight confirmation by inspector       |   |
| <input type="checkbox"/> Not reviewed              | <input checked="" type="checkbox"/> Verbal confirmation by facility staff |   |

Comments:

**DOC 350.11 (19) Cleaning agents are stored separately from food service items.**

COMPLIANCE

VERIFICATION

|  |  |   |
|--|--|---|
| <input checked="" type="checkbox"/> Meets standard | <input checked="" type="checkbox"/> Policy and procedure manual review | <input type="checkbox"/> Previous compliance documented |
| <input type="checkbox"/> Needs improvement         | <input type="checkbox"/> Sample of facility records reviewed           | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/> Non-compliant             | <input checked="" type="checkbox"/> Sight confirmation by inspector    |   |
| <input type="checkbox"/> Not reviewed              | <input type="checkbox"/> Verbal confirmation by facility staff         |   |

Comments:

**DOC 350.11 (20) A security procedure is in place to control and account for sharps, tools and utensils at all times.**

- Documentation of daily control and inventory is maintained.

COMPLIANCE

VERIFICATION

|   |   |   |
|---|---|---|
| <input checked="" type="checkbox"/> Meets standard    | <input checked="" type="checkbox"/> Policy and procedure manual review    | <input type="checkbox"/> Previous compliance documented |
| <input checked="" type="checkbox"/> Needs improvement | <input checked="" type="checkbox"/> Sample of facility records reviewed   | <input type="checkbox"/> Other (specify):               |
| <input type="checkbox"/> Non-compliant                | <input type="checkbox"/> Sight confirmation by inspector                  |   |
| <input type="checkbox"/> Not reviewed                 | <input checked="" type="checkbox"/> Verbal confirmation by facility staff |   |

Comments: Documentation of a daily inventory was observed.